

Part C State Performance Plan (SPP) for 2005-2010

Revised April 2010

Overview of the State Performance Plan Development:

The Virgin Islands Part C of IDEA, Infants and Toddlers Program the State Performance Plan (SPP) was developed using a variety of input, such as incorporation of improvement planning elements previously developed by Infants and Toddlers Program personnel during an OSEP 2005 site visit, and by input from the Vice Chairperson of the Interagency Coordinating Council (ICC) who submitted recommendations which have been added to the plan, as well as guidance from NECTAC, a technical assistance group, and a consultant to the program who has been assisting with planning improvements towards compliance. The stakeholders in general, and members specifically part of the Interagency Coordinating Council (ICC) Monitoring and Evaluation subcommittee will be responsible for the review of the Part C program performance throughout the 6 year SPP process. Infants and Toddlers Program personnel spent considerable concentrated time developing the improvement plan formed as a result of the OSEP site visit and believes that incorporating the activities into the SPP along with realistic timeframes over the next six years will strongly lead to significant improvements for the Infants and Toddlers Program and limit any duplicative efforts to produce the same.

The Infants and Toddlers Program will provide to the general public its six year State Performance Plan by placing it on the US Virgin Islands Department of Health's website www.us-vidoh.org by January 2006, and placing a hardcopy in both district offices of the Commissioner of the Department of Health and the Infants and Toddlers Program. The US Virgin Islands' Infants and Toddlers Program does not have a website.

Overview of the 2007 SPP Revision to the 2005-2010 SPP

The US Virgin Islands Department of Health, Infants and Toddlers Program's, 2005-2010 State Performance Plan (SPP) approved in March 2006 by the US Department of Education, **was** modified in congruence with changes made by the US Department of Education nationally to include the new indicators number 3, 4. It was further necessary to modify indicators 1, 5, 6, 8 and 9, 11, 13, 14 to reflect changes in the calculation of baseline figures, targets, and/or improvement activities. The SPP was modified with the guidance and assistance from NECTAC, consulting assistance, input from stakeholders via our Interagency Coordinating Council, and regular contact with our Part C State Contact in the US Department of Education. The modified State Performance Plan (SPP) will be posted on the US Virgin Islands Department of Health's website www.healthvi.org no later than May 1, 2010 and the public notified of the availability of the plan, through advertisements in print media in the US Virgin Islands. The initial State Performance Plan (SPP) will be posted on the new VIDH website.

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 1: Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement:

Percent = [(# of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner) divided by the (total # of infants and toddlers with IFSPs)] times 100.

Account for untimely receipt of services, including the reasons for delays.

Overview of Issue/Description of System or Process:

The Virgin Islands has adopted the following definition for “receive early intervention services in a timely manner”: Any IFSP service identified on the initial and subsequent IFSPs is initiated within 30 days from when the parent provides consent for the IFSP services.

The Virgin Islands Part C Program is considered one program that is organized into two districts: St Thomas/St John and St Croix. The December 1 child count (birth to age 36 months) indicated 178 infants and toddlers being served, representing 3.5% of VI's birth to 36 months population. The Part C Program has been challenged for many years with being able to recruit and retain sufficient numbers of qualified personnel to serve its eligible infants and toddlers, and consequently to always provide its early intervention services in a timely fashion. The FFY 2003 Part C grant to the Virgin Islands was approved by OSEP with special conditions in the areas of financial management, property management, recruiting and hiring, and data collection and reporting.

From November 2004 through February 2005 The Virgin Island Part C Coordinator, with technical assistance from the National Early Childhood Technical Assistance System (NECTAC), developed a new child record review form to be used in monitoring the performance of the Part C program regarding compliance with Part C regulatory requirements. The new record review form was used to review a sample of 41 child records in the St Thomas/St John district and in the St Croix district. This represents approximately 23% of the children being served, based on the Virgin Islands' December 1, 2004, 618 child count data. Record reviews were conducted in March and April of 2005. The sample of included infants and toddlers that had recently entered the program, those that had been receiving services for more than six months, and those who had transitioned from the program. The sample was also proportional to the numbers of infants and toddlers being served in each district.

Baseline Data for FFY 2004 (2004-2005):

Our baseline data measurement is based on 36 infants and toddlers who have IFSPs and whose records were reviewed in March and April 2005. These 36 children represent 20% of the total number of children counted in the December 1, 2004 child count, and are distributed between the two districts proportional to the total number of children being served in each district (there are more children served in the St Croix district). Twenty-five of the 36 infants and toddlers had all the services listed on their IFSPs initiated within 30 days of obtaining parent consent to provide services. The Virgin Islands definition of “timely services” is “any IFSP service identified on the initial and subsequent IFSPs are initiated within 30 days from when the parent provides consent for the IFSP service”. In addition there were 4 records indicating that initiation of one or more services was delayed due to family circumstance (which does not constitute noncompliance). Of the other 7 instances where all services were not initiated within 30 days, 3 were due to district circumstances,

one was due to provider circumstance, and 3 records did not have information to explain the reason for the delay. This yielded a baseline performance of 81% ($25+4/36=80.5$)

Discussion of Baseline Data:

The specific item on the child record review that yielded the baseline data was the following yes/no question: Were all the services initiated on their respective projected dates? (303.344). In order to receive a yes response every service listed on the child's IFSP had to have been initiated within 30 days. A follow up item listed four categories of reasons for a delay in the initiation of services: family circumstance, district circumstance, provider circumstance, and other. All instances of delay occurred in the St Croix district. Therefore, the record review data from St Thomas indicated 100% compliance with indicator #1; St Croix's data showed a 70% compliance.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100% of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs within 30 days after obtaining parent consent for the services
2006 (2006-2007)	100% of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs within 30 days after obtaining parent consent for the services
2007 (2007-2008)	100% of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs within 30 days after obtaining parent consent for the services
2008 (2008-2009)	100% of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs within 30 days after obtaining parent consent for the services
2009 (2009-2010)	100% of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs within 30 days after obtaining parent consent for the services
2010 (2010-2011)	100% of infants and toddlers with IFSPs will receive the early intervention services on their IFSPs within 30 days after obtaining parent consent for the services

Improvement Activities/Timelines/Resources:

Part C State Performance Plan (SPP) for 2005-2010**Overview of the State Performance Plan Development:***(The following items are to be completed for each monitoring priority/indicator.)***Monitoring Priority: Early Intervention Services In Natural Environments****Indicator 2:** Percent of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement: Percent = [(# of infants and toddlers with IFSPs who primarily receive early intervention services in the home or community-based settings) divided by the (total # of infants and toddlers with IFSPs)] times 100.**Overview of Issue/Description of System or Process:****Baseline Data for FFY 2004 (2004-2005):****Discussion of Baseline Data:**

FFY	Measurable and Rigorous Target
2005 (2005-2006)	82% of infants and toddlers with IFSPs receive their early intervention services primarily in the home or programs for typically developing children.
2006 (2006-2007)	84% of infants and toddlers with IFSPs receive their early intervention services primarily in the home or programs for typically developing children
2007 (2007-2008)	86% of infants and toddlers with IFSPs receive their early intervention services primarily in the home or programs for typically developing children.
2008 (2008-2009)	88% of infants and toddlers with IFSPs receive their early intervention services primarily in the home or programs for typically developing children.
2009 (2009-2010)	90% of infants and toddlers with IFSPs receive their early intervention services primarily in the home or programs for typically developing children.

2010 (2010-2011)	90% of infants and toddlers with IFSPs receive their early intervention services primarily in the home or programs for typically developing children.
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Improvement Activities/Timelines/Resources:

2005-2006:

- Continue activities related to this indicator on IFSP revision, identification of monitoring personnel to conduct Child Record reviews. Ongoing. Resource: NECTAC.
- Develop and distribute guidance materials on requirements for natural environments. Territory Staff. January 2006.
- Provide training to districts not in compliance on IDEA requirements. February 2006
- Monitor all IFSP developed after training activities. May 2006. Program Staff will carry out these activities. (Monitoring of this indicator will occur in conjunction with ongoing Territory monitoring of the system throughout the SPP time period).

2006-2007

- Technical assistance and staff training for effective strategies and options for provision of early intervention in the home and community settings. (Priority- St. Thomas/St. John district.) Resource: NECTAC or other trainers. September 2006.
- Monitor random sample of IFSPs completed after training for compliance with natural environments. Resource: Territory staff, NECTAC. March 2007
- Review status of progress and adjust targets, timelines, and activities, as needed.

2007-2008

- Provide in depth training on all aspects of natural environments requirements, parent involvement, settings, decision-making, justification, etc. September 2007. Resources: NECTAC or other training source.
- Monitor random sample of IFSPs completed after training for compliance with natural environments. Resource: Territory Staff. March 2008
- Identify data targets for this indicator for inclusion in electronic data base. Resource: Data personnel. May 2008.

2008-2009

- Provide training for parents on IFSP decision-making with emphasis on natural environments issues. September: 2008. Resource: To be determined
- Network with community settings resources to expand options for settings in natural environments. Resource: Territory and local district program staff. January to June 2009

2009-2010

- Review progress, adjust targets and plan for future activities to ensure compliance. Resource: Territory staff. September 2009.
- **Develop checklist for Service Coordinators. Implemented March 2010**

2010-2011

- Review progress, adjust targets and plan for future activities to ensure compliance. Resource: Territory staff. September 2010

Part C State Performance Plan (SPP) for 2005-2010**Overview of the State Performance Plan Development:***(The following items are to be completed for each monitoring priority/indicator.)***Monitoring Priority: Early Intervention Services In Natural Environments****Indicator 3:** Percent of infants and toddlers with IFSPs who demonstrate improved:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/ communication); and
- C. Use of appropriate behaviors to meet their needs.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement:

Outcomes:

- A. Positive social-emotional skills (including social relationships);
- B. Acquisition and use of knowledge and skills (including early language/communication); and
- C. Use of appropriate behaviors to meet their needs.

Progress categories for A, B and C:

- a. Percent of infants and toddlers who did not improve functioning = $[(\# \text{ of infants and toddlers who did not improve functioning}) \div (\# \text{ of infants and toddlers with IFSPs assessed})] \times 100$.
- b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers = $[(\# \text{ of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers}) \div (\# \text{ of infants and toddlers with IFSPs assessed})] \times 100$.
- c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it = $[(\# \text{ of infants and toddlers who improved functioning to a level nearer to same-aged peers but did not reach it}) \div (\# \text{ of infants and toddlers with IFSPs assessed})] \times 100$.
- d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers = $[(\# \text{ of infants and toddlers who improved functioning to reach a level comparable to same-aged peers}) \div (\# \text{ of infants and toddlers with IFSPs assessed})] \times 100$.
- e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers = $[(\# \text{ of infants and toddlers who maintained functioning at a level comparable to same-aged peers}) \div (\# \text{ of infants and toddlers with IFSPs assessed})] \times 100$.

Summary Statements for Each of the Three Outcomes (use for FFY 2008-2009 reporting):

Summary Statement 1: Of those infants and toddlers who entered or exited early intervention below age expectations in each Outcome, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.

Measurement for Summary Statement 1:

Percent = # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in category (d) divided by [# of infants and toddlers reported in progress category (a) plus # of infants and toddlers reported in progress category (b) plus # of infants and toddlers reported in progress category (c) plus # of infants and toddlers reported in progress category (d)] times 100.

Summary Statement 2: The percent of infants and toddlers who were functioning within age expectations in each Outcome by the time they turned 3 years of age or exited the program.

Measurement for Summary Statement 2: Percent = # of infants and toddlers reported in progress category (d) plus [# of infants and toddlers reported in progress category (e) divided by the total # of infants and toddlers reported in progress categories (a) + (b) + (c) + (d) + (e)] times 100.

Overview of Issue/Description of System or Process:

- Measurement strategies used to collect data
 - All children who were determined eligible after January 1, 2006 and who will most likely remain in the system for at least 6 months will be assessed for progress on this indicator.
 - The ELAP and HELP are used for assessment observation and the ECO COSF will be used to report a child's status at entry and exit from the program.
 - The therapist on the child's IFSP conducts the assessments.
 - Assessment and completion of the rating occurs at entry and exit to the system.
 - Districts collect the ECO COSF and submit them to the administrative office of ITP. That data is uploaded in the ECO calculator which includes the rules in the calculation of the individual child data in each category.
 - Those results are analyzed to indicate the impact of EIS.

The Virgin Islands Infant and Toddler Program collects comprehensive data on the IFSP process through its IFSP Record review process. The specific data collection system to measure infants and toddlers' improved positive social-emotional skills, acquisition and use of knowledge and skills, and use of appropriate behaviors to meet their needs will include the following:

- *Policies and procedures to guide assessment and measurement practices*
- *Training and technical assistance supports for administrators, service coordinators, service providers in outcome data collection, reporting and use.*
- *Quality assurance and monitoring procedures to ensure accuracy and completeness of the outcome data.*
- *Data system elements for outcome data input and maintenance, and outcome data analysis functions, including plans for electronic data collection.*

Policies and procedures to guide assessment and measurement practices

The Virgin Islands Infants and Toddlers Program has developed comprehensive guidance on the individual family service plan (IFSP) process, including assessment. All eligible children who were determined eligible after January 1, 2006 and who will most likely remain in the system for at least 6 months will be assessed for progress on this indicator at least twice. The VI ITP has two districts; the St. Thomas/St. John district primarily uses the HELP Curriculum and St. Croix primarily uses the E-LAP Curriculum for assessment. Both districts will use the assessment tools, observations and the Early Childhood Outcomes Center Child Outcomes Summary Form (COSF) in order to report a child's status at entry to and exit from the program (See Attachment 3). The COSF is a 7-point scale for summarizing information related to a child's progress on each of the three child outcome areas required by OSEP. The COSF is used for summarizing across multiple sources of information about the child. Summary data is collected on all newly identified children to ensure an adequate number of

children are included to report entry status. Therefore, the Child Outcomes reported are representative since they include all children.

The assessment tools used for the outcomes measurement are part of the initial evaluation and assessment process conducted to determine the child's eligibility and/or needs. The results of a child's assessment, along with other observations, are used to help summarize the child's behavior across settings and situations and to provide outcome ratings that compare the child's skills and behaviors to same age peers. The COSF will be completed by a team including (at a minimum) the parent, an evaluator, and the service coordinator. Reassessment will occur and another COSF completed at least once before the child exits the program for each child who has been in the program at least 6 months. The reassessment will occur during the transition activities or prior to exit from the program.

COSF ratings for both entry and exit are entered in a database for each child enrolled in the program for at least six months. The VI Infants and Toddlers Program will utilize guidance developed by the ECO Center on how COSF data can be used to address the OSEP reporting requirements and tools from ECO to calculate reporting categories and summary statements. The child outcome data will be summarized for each cohort of children for a particular year in order to categorize children into the OSEP reporting categories. Program personnel have developed a sound foundation of understanding and using the COSF through several mechanisms, such as providing written policies, procedures and information on child outcomes, trainings by ECO and NECTAC personnel on-site and by telephone for EIS personnel, and handouts such as flow charts to enable sound decision-making while completing the outcome ratings.

Training and technical assistance supports for administrators, service coordinators, service providers in outcome data collection, reporting and use.

Current personnel have been trained on the administration and use of the HELP or the E-LAP, depending on the district. Training on the use and application of these assessments, observations and COSF for measuring outcomes, recording the data and reporting the data was provided to all early intervention program office, health district staff and providers. An overview of requirements for developing, collecting and reporting early childhood outcomes for the SPP was begun in February 2006, with a follow-up conference call held in May of 2006 (PowerPoint slides and handouts) using NECTAC staff, the OSEP project officer and Terese Lilly, VI consultant. A third conference call was held in June 2006 and included training and practice in the use of the COSF by a staff person from the Early Childhood Outcome Center and NECTAC. Further training on using the COSF to gather status at exit for each of the three outcomes and in categorizing each child outcomes to determine child progress in functioning on the three outcome indicators to report baseline data for the first cohort of infants and toddlers, developing targets and improvement activities with personnel and family input was held in the Spring of 2007, and Fall of 2008 during an on-site visit from ECO and NECTAC staff.

Quality assurance and monitoring procedures to ensure accuracy and completeness of the outcome data.

Child outcomes data collection will be monitored prior to the end to FFY2006. The individual COSF forms will be reviewed to ensure completeness and accuracy prior to transmission to the VI ITP office. Verifying child outcomes data to ensure compliance in the future will become part of the Virgin Island's quality assurance and monitoring procedures. The individual COSF forms will be reviewed to ensure completeness and accuracy prior to transmission to the VI ITP office. Verifying child outcomes data to ensure compliance in the future will become part of the Virgin Island's quality assurance and monitoring procedures.

Monitoring (using established procedures in place for determining the number of records reviewed) will include a review of the supporting data that helped establish the COSF score. Additional trainings reference above will help to ensure reliability and improvements in the process through an analysis of common problems across COSF forms completed every year from FFY 2005 through present. In August 2007, the ECO Center conducted a quality review of the COSF ratings and provided feedback to the program and personnel to improve the process. This was followed by an on-site training. Every year, each COSF form is reviewed by the Part C Coordinator and issues in the collection of the COSF data is noted and shared with personnel. Thus, the process of collecting child outcome data appears to be effective.

Data system elements for outcome data input and maintenance, and outcome data analysis functions, including plans for electronic data collection.

The Virgin Islands is in the planning process of developing an electronic data collection system. The outcomes data information will be collected electronically, allowing an increased capability for data analysis. In the meantime, the VI will use the ECO Excel Calculator to collect the entry and exit data and to calculate the OSEP Outcome Exit categories. Collecting data using the ECO Excel Calculator will assist the program in identifying data points for its electronic system, and enable staff to analyze the data to identify progress on the identified outcomes.

Since the Virgin Islands Part C program is using the ECO summary tool, the criteria for defining “comparable to same-aged peers” has been defined as a child who has been scored as a 6 or 7 on the COSF.

Progress Data for Infants and Toddlers Exiting 2008-2009:

A. Positive social-emotional skills (including social relationships):	Number of children	% of children
a. Percent of infants and toddlers who did not improve functioning	0	0
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers but did reach	6	14%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers	14	33%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	18	43%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	4	43%
Total	N = 42	100%
B. Acquisition and use of knowledge and skills (including early language/communication):	Number of children	% of children
a. Percent of infants and toddlers who did not improve functioning	0	0%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers but did reach	6	14%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers	19	45%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	13	31%
e. Percent of infants and toddlers who maintained functioning at a level	4	10%

comparable to same-aged peers		
Total	N = 42	100%
C. Use of appropriate behaviors to meet their needs:	Number of children	% of children
a. Percent of infants and toddlers who did not improve functioning	2	5%
b. Percent of infants and toddlers who improved functioning but not sufficient to move nearer to functioning comparable to same-aged peers but did reach	4	10%
c. Percent of infants and toddlers who improved functioning to a level nearer to same-aged peers	7	17%
d. Percent of infants and toddlers who improved functioning to reach a level comparable to same-aged peers	24	57%
e. Percent of infants and toddlers who maintained functioning at a level comparable to same-aged peers	5	12%
Total	N = 42	100%

Baseline Data for Infants and Toddlers Exiting 2008-2009

Summary Statements	% of children
Outcome A: Positive social –emotional skills (including social relationships)	
1. Of those children who exited or entered the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.	84.2%
2. The percent of children who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program.	52.4%
Outcome B: Acquisition and use of knowledge and skills including early language/communication and early literacy	
1. Of those children who exited or entered the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.	84.2%
2. The percent of children who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program.	40.5%
Outcome C: Use of appropriate behaviors to meet their needs	
1. Of those children who exited or entered the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program.	83.8%
2. The percent of children who were functioning within age expectations in Outcome C by the time they turned 3 years of age or exited the program.	69.0%

Discussion of Baseline Data:

The COSF ratings are conducted for all children determined eligible for the Part C program and is completed at the time when the IFSP is developed. Therefore, the Child Outcomes reported are representative since they include all children. The ECO COSF is a 7-point scale is used for summarizing information related to a child's progress on each of the three child outcome areas required by OSEP. The Child Outcome Summary Form is used for summarizing across multiple sources of information about the child. Summary data is collected on all newly identified children to ensure an adequate number of children are included to report entry status.

In the two categories: Social-Emotional Skills and Acquiring and Using Knowledge and Skills, all of the infants and toddlers rated during this period improved function to a level nearer to same aged peers. In the category of Social-Emotional Skills, 42.9% of the infants and toddlers rated during this period improved functioning to reach a level compared to same aged peers. And 9.5% of infants and toddlers rated during this period maintained functioning at a level comparable to same aged peers. In the category of Taking Appropriate Action to Meet Needs, 57.1% infants and toddlers rated during this period improved functioning to reach a level compared to same aged peers, and 11.9% maintain functioning at a level comparable to same-aged peers.

Of those children who entered the program below age expectations in the Social-Emotional Skills outcome, 84.2% substantially increased their rate of growth in this outcome by the time they exited. Of those children who entered the program below age expectations in the Acquiring and Using Knowledge and Skills outcome, 84.2% substantially increased their rate of growth in this outcome by the time they exited. And of those who entered the program below expectations in Taking Appropriate Action to Meet Needs, 83.8% substantially increased their rate of growth in this outcome by the time they exited.

Targets for Infants and Toddlers Exiting in FFY 2009 (2009-10) and FFY 2010 (2010-2011) and Reported in Feb 2011 and Feb 2012

Summary Statements	Targets for FFY 2009 (% of children)	Targets for FFY 2010 (% of children)
Outcome A: Positive social-emotional skills (including social relationships)		
1. Of those children who entered the program below age expectations in Outcome A, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	84.2%	85%
2. The percent of children who were functioning within age expectations in Outcome A by the time they turned 3 years of age or exited the program	52.4%	53%
Outcome B: Acquisition and use of knowledge and skills (including early language/communication and early literacy)		
1 Of those children who entered the program below age expectations in Outcome B, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	84.2%	85%
2. The percent of children who were functioning within age expectations in Outcome B by the time they turned 3 years of age or exited the program	40.5%	41%
Outcome C: Use of appropriate behaviors to meet their needs		
1 Of those children who entered the program below age expectations in Outcome C, the percent who substantially increased their rate of growth by the time they turned 3 years of age or exited the program	83.8%	84.5%
2. The percent of children who were functioning within age	69.0%	69.5%

expectations in Outcome C by the time they turned 3 years of age or exited the program		
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The targets were set are considered based on reasonableness. Although analysis indicates significant positive impact of EIS on outcomes of children enrolled in the Part C system, we are cautious about. Factors such as adequate personnel as well training on best practices influence target setting.

Improvement Activities/Timelines/Resources:

- Training refreshers as well as on-going targeted training will be provided to EIS personnel, including Service Coordinators, on early childhood outcomes, the use of the COSF, and quality assurance. On-going ITP personnel and TA such as NECTAC and ECO
- Local personnel in each district have had additional trainings on using the ECO Child Outcome Summary form including in 2008 and 2009. Information and materials around the new OSEP reporting categories and how to use the COSF ratings to determine the categories for all three outcomes were shared. Additional training was held on collecting child outcome data at entry and exit, relying on feedback from personnel involved in child outcome ratings and analysis of common problems related to collection of status at entry data the first cohort of child outcome data. Resources: VI ITP Staff, consultant, NECTAC and ECO Implemented.
- Child outcomes data will be monitored prior to submission for the annual performance reports. The individual COSF forms will be reviewed to ensure completeness and accuracy prior to transmission to the VI ITP administrative office. Verifying child outcomes data to ensure compliance in the future will become part of the Virgin Island's quality assurance and monitoring procedures. Monitoring will include a review of the supporting data that helped establish the COSF score. Additional training in 2008 has helped ensure improvements in the process through the COSF forms completed subsequent to September 2006. Resources: VI ITP Staff, consultant, NECTAC and ECO Implemented.

Improvement Activities/Timelines/Resources:

In October 2006, personnel were provided training on using the Early Childhood Outcome Center's (ECO) Early Childhood Outcome Summary Form (COSF). To view a sample of the COSF, see the Attachment #1. Personnel were also provided training on the COSF and the collection of its data in June 2007, and March 2008.

In August 2007 ITP personnel attended the OSEP Accountability Conference and ECO conference and used materials and resources to support the program in improvement.

ECO provided a quality review of COSF forms and had a conference call with you (Sept. 2007). NECTAC provided training in November 2007.

Personnel received one day training on early childhood outcomes, the COSF, and quality assurance in October 2008 by staff from the Early Childhood Outcomes Center and NECTAC.

2009-2010

Refreshers and on-going training will be provided to EIS personnel, including Service Coordinators on early childhood outcomes, the COSF, and quality assurance. ITP personnel and TA such as NECTAC and ECO Implemented

2010-2011

Refreshers and on-going training will be provided to EIS personnel, including Service Coordinators on early childhood outcomes, the COSF, and quality assurance. On-going ITP personnel and TA such as NECTAC and ECO.

Part C State Performance Plan (SPP) for 2005-2010

Overview of the State Performance Plan Development:

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority: Early Intervention Services In Natural Environments

Indicator 4: Percent of families participating in Part C who report that early intervention services have helped the family:

- A. Know their rights;
- B. Effectively communicate their children's needs; and
- C. Help their children develop and learn.

(20 U.S.C. 1416(a)(3)(A) and 1442)

Measurement:

- A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.
- B. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs) divided by the (# of respondent families participating in Part C)] times 100.
- C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

Overview of Issue/Description of System or Process:

The Virgin Islands Infants and Toddlers Program used the Child Record Review, piloted in March – April 2005, to collect some information related to this indicator, such as whether parents received their rights, if documentation of appropriate notices were given, and permissions were documented. Parents and families are included in every aspect of the IFSP process; guidance documents on the IFSP process are written from the family's perspective. The process to collect data to document that families know their rights, can effectively communicate their children's needs, and can help their children develop and learn, will be ensured through the following processes.

- Policies and procedures to collect data and guide outcome assessment and data collection.
- Provision of training and technical assistance to administrators, service coordinators, service providers on procedures for administering survey and collection and use of survey results.
- Monitoring procedures to ensure accuracy and consistency of data collection
- Procedures for data maintenance and analysis, including plans for electronic data collection.

All families whose children are exiting during this report period are asked to respond to just three (3) key questions on this modified VI ECO Family Survey, therefore it is representative of the population served. When the survey was initially mailed out to families who were exiting, we received very low return responses. So it was decided that we would ask each family to complete this short survey at the conclusion of their child's individual transition meeting. Parents typically complete the survey while waiting for copies of the meeting notes and/or other documents, thereby wisely using their time and providing a more convenient method for the family to respond. The survey can be read to the parent, and any

clarification needed could be provided at that time. Either clerical staff persons or the ITP Director ask the parents to complete the survey.

Policies and procedures to collect data and guide outcome assessment and data collection.

The Virgin Islands Infants and Toddlers program incorporates the Family Outcomes Survey (with modifications), developed by the Early Childhood Outcomes (ECO) Center, to ensure compliance with this indicator. The survey collects information in five areas identified by the ECO Center: Families understand their child's strengths, abilities, and special needs; Families know their rights and advocate effectively for their children; Families help their child develop and learn; Families have support systems; Families access desired services, programs, and activities in their community.

The Virgin Islands Infants and Toddlers program shared the Family Outcomes Survey with the providers in both districts for input and feedback on the use of this survey with the diverse population of families in both districts. The providers were concerned that a majority of the families that they work with would not be able to understand the questions on the ECO Family Survey, even if the surveys were read to the families. With help from NECTAC, the Virgin Islands Infants and Toddlers program consulted with Dr. Don Bailey from ECO (one of the survey developers), shared concerns and together modified the Family Outcomes Survey in the following manner: The program will collect responses to ECO Family Survey questions #16-18 (renumbered as Questions 1 – 3). Each question has a 7 point rating scale with an additional 8th point if the family does not understand the question. Based on local EI providers input and with agreement of Dr. Bailey, some words/phrases were replaced to enhance understanding of the survey concepts by families. A copy of the modified Family Survey is attached (See Attachment 4).

Surveys were provided to parents starting on March 1, 2006 through June 30, 2006 for collecting baseline data. Surveys were mailed to all families whose child exited during this time period. Completed surveys were returned by mail. The baseline has been established from the results of these surveys. The data were analyzed to obtain data distinctive to each of the sub-parts of this indicator. The measurements guidelines outlined in the Measurement section above provided an accounting of the status of these outcomes.

Beginning July 1, 2006, The VI ITP will survey all families who currently have eligible children enrolled in the program and whose child is exiting the program; if the family agrees, the survey will be completed at least once by every family near exit. Multiple methods will be used to distribute surveys and assist families in completing the survey. For example: With agreement from families, the service coordinator or service providers can collect completed surveys at the transition conference; families can be provided with pre-addressed envelopes to be sent directly to the VI ITP Territory office; or families can give the survey to their local district administrator. Further refinements of the process for collecting the surveys will be developed from an analysis of the baseline and the process for collecting the baseline.

Provision of training and technical assistance to administrators, service coordinators, service providers on procedures for administering survey and collection and use of survey results.

Training and technical assistance will be provided to local administrators and service providers on techniques to ensure successful completion of the surveys, including use of alternate means for families to complete the surveys. The importance and use of the results of the surveys can be used to identify areas for improvement in the program.

Results from the family surveys will be used for general program improvement. Training activities will be developed using these surveys with input and assistance from families.

Monitoring procedures to ensure accuracy and consistency of data collection

Monitoring procedures will be instituted to ensure families' privacy and collection of data for all parents of children who enter the program after March 1, 2006, and who agree to collection of these data. The procedures will include review of local practices, review of records, parent interviews, and follow-up training.

Procedures for data maintenance and analysis, including plans for electronic data collection.

The Virgin Islands is in the planning process of developing an electronic data collection system. The outcomes data information can be collected electronically, allowing an increased capability for data analysis. In the meantime, procedures to record data on forms developed for that purpose will assist the program in identifying data points for its electronic system, and enable staff to analyze the data to identify progress on the identified outcomes.

Baseline Data for FFY 2005 (2005-2006):

FFY 2005	Baseline Percentage
Indicator 4A	92%
Indicator 4B	83%
Indicator 4C	92%

- A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.

$$11/12 \times 100 = 92\%$$

- B. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs) divided by the (# of respondent families participating in Part C)] times 100

$$10/12 \times 100 = 83\%$$

- C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

$$11/12 \times 100 = 92\%$$

Disaggregated by District:**St. Croix (N = 5)**

- A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.

$$4/5 \times 100 = 80\%$$

B. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs) divided by the (# of respondent families participating in Part C)] times 100

$$4/5 \times 100 = 80\%$$

C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

$$4/5 \times 100 = 80\%$$

St. Thomas (N = 7)

A. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family know their rights) divided by the (# of respondent families participating in Part C)] times 100.

$$7/7 \times 100 = 100\%$$

B. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family effectively communicate their children's needs) divided by the (# of respondent families participating in Part C)] times 100

$$6/7 \times 100 = 86\%$$

C. Percent = [(# of respondent families participating in Part C who report that early intervention services have helped the family help their children develop and learn) divided by the (# of respondent families participating in Part C)] times 100.

$$7/7 \times 100 = 100\%$$

Discussion of Baseline Data:

Surveys were mailed to all families whose children were near exit between March 1, 2006 and June 30, 2006. Surveys were mailed from each district office (St. Thomas/St. John = 27 mailed and St. Croix = 19 surveys mailed); nine surveys were returned as “undeliverable”, giving a total of 37 families surveyed. Of the 37 families surveyed, 12 families responded for a return rate of 12/37 or 32%. Responses for each question are summarized. Question 1 address Indicator 4A; Questions 2, Indicator 4B and Question 3, Indicator 4C. Scores of good or excellent (ratings of 5 or 7 on the scale) were included in the scoring to determine the percentage rate

Question #1. To what level has early intervention helped your family know and understand your rights?

Seven of the respondents gave a rating of 7 (“Early intervention has done an excellent job of helping us know about our family’s rights”). Four of the respondents gave a rating of 5 (“Early intervention has done a good job of helping us know about our family’s rights”). One respondent gave a rating of 8 indicating that the respondent did not understand the question.

Question #2: To what level has EI helped your family be able to talk about your child’s need to others? Seven of the respondents gave a rating of 7 (“Early intervention has done an excellent job of helping us be able to talk about our child’s needs to others.”) Three respondents gave a rating of 5 (“Early intervention has done a good job of helping us to be able to talk about our child’s needs to others.”). One respondent gave a rating of 3 (“Early intervention has done a few things to help us be able to talk about our child’s needs to others.”). One respondent did not answer this question.

Question #3: To what level has EI helped your family be able to help your child grow and learn? Nine of the respondents gave a rating of 7 (“Early intervention has done an excellent job of helping us help our child grow and learn”). Two of the respondents gave a rating of 5 (“Early intervention has done a good job of helping us help our child grow and learn.”) One respondent gave a rating of 3 (“Early intervention has done a few things so that we can help our child grow and learn.”). One respondent rated the question with an 8, indicating the respondent did not understand the question.

In developing the modified version of the ECO Family Survey, providers expressed concerns about families’ understanding of the questions. With the modifications, there were only a few instances of a family not rating a question or rating the question as an 8 (8 = I don’t understand the question). However, the return rate was low using only a mail-in strategy. Improvement strategies will address how to improve response rate and improve ratings for each question on the Family Survey.

Baseline Data for FFY 2004 (2004-2005):

Discussion of Baseline Data:

FFY	Measurable and Rigorous Target
2005 (2005-2006)	Baseline.
2006 (2006-2007)	A. 92%, B. 83%, C. 92%
2007 (2007-2008)	A. 92%, B. 83%, C. 92%
2008 (2008-2009)	A. 92%, B. 83%, C. 92%
2009 (2009-2010)	A. 92.5%, B. 83.5%, C. 92.5%
2010 (2010-2011)	A. 92.5%, B. 83.5%, C. 92.5%

Improvement Activities/Timelines/Resources:

2006-2007

- Revise Family Survey and instructions to incorporate improvements recommended by stakeholders during development of the SPP. February 2007. Resources: VI ITP staff

- Interview families, representatives from VI Find (PTI), the VI ICC and providers to determine the most effective ways to reach more families in each district. February – March 2007 Resources: VI ITP staff; outside consultant
- Develop methods to facilitate families completing the survey including strategies to follow-up with families who did not complete the survey. March 2007 Resources: VI ITP staff; outside consultant and NECTAC
- Develop and disseminate information to provide families with information about the purpose and use of a Family Survey. March 2007 Resources: VI ITP staff; outside consultant, NECTAC
- Analyze survey data by district for trends in relationship to quality practices. June 2007 Resources: VI ITP staff; outside consultant

2007-2011

- Utilize methods for helping families complete the survey including strategies to follow-up with families who did not complete the survey. Ongoing Resources: VI ITP staff
- Disseminate information to provide families with information about the purpose and use of a Family Survey. Ongoing Resources: VI ITP staff
- Provide targeted training for personnel based on an analysis of 2006-2007 family survey results and in subsequent years based on analysis of survey results. October 2007 and ongoing Resources: VI ITP, outside consultant and NECTAC
- Develop an interview to use with families as part of the quality assurance and monitoring system in order to verify survey results. March 2007 and ongoing Resources: VI ITP, outside consultant and NECTAC
- Analyze survey data by district for trends in relationship to quality practices. Ongoing Resources: VI ITP, outside consultant and NECTAC

Part C State Performance Plan (SPP) for 2005-2010**Overview of the State Performance Plan Development:***(The following items are to be completed for each monitoring priority/indicator.)***Monitoring Priority: Effective General Supervision Part C / Child Find****Indicator 5:** Percent of infants and toddlers birth to 1 with IFSPs compared to national data.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent = [(# of infants and toddler birth to 1 with IFSPs) divided by the (population of infants and toddlers birth to 1)] times 100 compared to national data.

Overview of Issue/Description of System or Process:

Most referrals come at time of birth from the public hospitals on St Thomas and St Croix and soon thereafter from public health clinics administered by the Department of Health, including the Maternal Child Health and Children with Special Health Care Needs Program (MCH & CSHCN). Infants who are in need of neonatal intensive care services are transferred to Puerto Rico. Service coordinators maintain contact with families until they return to the Virgin Islands. Parents are the third largest source of referrals. Referral source is recorded on the intake/referral form by the service coordinator through a family interview.

Public awareness activities on both islands include:

- providing information about the Part C program to expectant mothers during their last trimester in clinic facilities and in the public hospitals,
- running advertisements about the Part C (Early Intervention) program on local TV stations,
- providing information about the program on the Department of Education's educational television channel,
- providing brochures, staff and screenings at community events,
- participate in the Best Beginnings (annual early childhood conference) sessions, and
- periodically provide orientation and in-service training to hospital and clinic staff

Other agencies/organization engaged in child find efforts are represented by members on the ICC and are given Part C Early Intervention brochures to distribute in respective agencies/programs. The interagency agreement between Dept. of Education, Dept. of Human Services and Dept. of Health has been signed and includes provisions as it relates to child find. Recently, an existing partnership agreement with the Early Head Start program and the Part C program was revised and renewed. Also a preliminary meeting between the Foster Care program and the Part C program was held to develop referral procedures. ADD CAPTA procedures

Data for the 618 table is collected manually by the service coordinators in each district through review of referral and IFSP forms. The Part C Coordinator conducts cross checks of the data for accuracy.

Baseline Data for FFY 2004 (2004-2005):

Using 618 Data from 2004, the Virgin Islands served 28 infants birth to 1 with IFSPs out of a population of 1, 672 or 1.67%. National data (including at risk children) show that the national

percent of infants and toddlers with IFSPs is .98%. The Virgin Islands difference from the National average is +.69%.

Discussion of Baseline Data:

Baseline data had been calculated based on the birth to one population, *excluding at risk* and based on 42/1672 children on Dec.1, 2004. In preparing the APR, the SPP baseline has been re-calculated based on the birth to one population, *including at risk and recalculating the number of infants and toddlers birth to one with IFSPs to 28/1672 or 1.67%*. The SPP baseline has been revised to reflect this change. Proposed targets for indicator 5 have been revised in the SPP to the "VI will meet or exceed the National percent of infants and toddlers birth to one with IFSPs".

The Virgin Islands have been highly successful in the percent of infants and toddlers birth to one with IFSPs in 2004 and over time. The population of infants and toddlers ages birth to 1 in the Virgin Islands is 1,672. Virgin Island's Infants and Toddlers Program continues to rank favorably when compared with states that have similar broad eligibility definitions and with the national percent (+.69% above the national average). With IDEA 2004 statutory changes, policies and procedures will need to be developed with Dept. of Human Services and their child protective services/foster care programs. New outreach efforts to locate, identify and serve young children who are homeless will need to be improved. While there has been some preliminary analysis of referral sources, strategies may need to be put into place to analyze gaps in referrals from some specific referral sources that may not be providing public awareness information to parents and referrals to the Infants and Toddlers Program.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	VI will meet or exceed the National percent of infants and toddlers birth to one with IFSPs
2006 (2006-2007)	VI will meet or exceed the National percent of infants and toddlers birth to one with IFSPs
2007 (2007-2008)	VI will meet or exceed the National percent of infants and toddlers birth to one with IFSPs
2008 (2008-2009)	VI will meet or exceed the National percent of infants and toddlers birth to one with IFSPs
2009 (2009-2010)	VI will meet or exceed the National percent of infants and toddlers birth to one with IFSPs
2010 (2010-2011)	VI will meet or exceed the National percent of infants and toddlers birth to one with IFSPs

Improvement Activities/Timelines/Resources:

2005-2006

- Meet with representatives from the Virgin Islands Department of Human Services, Division of Family Services, to jointly plan for the timely referral of children who are involved in substantiated cases of abuse and neglect or identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure. Resources: VI ITP and Division of Family Services. February 2006
- Identify and implement activities to ensure identification of children whose parents speak a language other than English, such as translating documents, identifying liaisons, and other community organizations to develop partnerships. Resources: VI ITP staff and VI ICC. On going.
- Develop and implement a plan to systematically disseminate Spanish translations of VI ITP materials for families through Hispanic organizations and the Hispanic radio programs. Resources: VI ITP staff, VI Find, Hispanos Unidos. March 2006
- Examine the ICC membership to ensure ICC membership is representative of all children and families, including minority, low income, inner city, rural, homeless and children in foster care. Resource: VI ITP March 2006.
- Examine how our current definition of eligibility is being applied in the process of identifying eligible children to determine if any changes in policy or practice are warranted. Resources: VI ITP. February 2006

2006-2007

- Examine the ICC membership to ensure ICC membership is representative of all children and families, including minority, low income, inner city, rural, homeless and children in foster care. Resource: VI ITP February 2007.
- Meet with representatives from the Virgin Islands Department of Human Services, Division of Family Services, to jointly plan for the timely referral of children who are involved in substantiated cases of abuse and neglect or identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure. Resources: VI ITP and Division of Family Services February - March 2007
- Finalize plan for the timely referral of children who are involved in substantiated cases of abuse and neglect or identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure. Resources: VI ITP and Division of Family Services. March 2007
- Identify and implement activities to ensure identification of children whose parents speak a language other than English, such as translating documents, identifying liaisons, and other community organizations to develop partnerships. Resources: VI ITP staff and VI ICC. On going
- Develop and implement a plan to systematically disseminate Spanish translations of VI ITP materials for families through Hispanic organizations and the Hispanic radio programs. Resources: VI ITP staff, VI Find, Hispanos Unidos. April 2007
- Provide training to all early intervention staff and appropriate Department of Human Service staff on identification and referral of children who are involved in substantiated cases of abuse and neglect or identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure, homeless or in foster care. Resources: VI ITP, Division of Family Services, NECTAC. April 2007
- Continue current efforts to maintain a comprehensive child find system and continue monitoring referral sources and current outreach efforts. Resources: VI ITP Territory and local staff. On going.

2007-2008

- Update plan for identifying deaf and hard of hearing children, homeless children and those in foster care. Resources: VI ITP. August 2007

- Develop specific strategies to promote public awareness activities with churches, public housing projects and shelters for the homeless. Resources: VI ITP and community. November 2007
- Revise targets and improvement activities if needed. Resource: VI ITP, other consultants as needed. January 2008
- Review effectiveness of training activities through monitoring of referrals, referral sources and parent interview. VI ITP April 2008
- Meet with Early Head Start staff to coordinate child find activities. Resources: VI ITP and Early Head Start staff. May 2008
- Continue training to ensure identification of children who are involved in substantiated cases of abuse and neglect or are identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure if needed. Resources: VI ITP staff. On going.
- Continue current efforts to maintain a comprehensive child find system and continue monitoring referral sources and current outreach efforts. Resources: VI ITP Territory and local staff. On going.

2008-2009

- Review strategies to promote public awareness activities for all children with all community resources, public and private. Resources: VI ITP and referral resources. On going.
- Review progress, adjust targets and plan for future activities to ensure compliance. Resources: VI ITP. September 2009
- Revise targets and improvement activities if needed. Resource: VI ITP, other consultants as needed. January 2010
- Continue training to ensure identification of children who are involved in substantiated cases of abuse and neglect or are identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure if needed. Resources: VI ITP staff. On going.
- Continue current efforts to maintain a comprehensive child find system and continue monitoring referral sources and current outreach efforts. Resources: VI ITP Territory and local staff. On going.

2009-2010

- Review strategies to promote public awareness activities for all children with all community resources, public and private. Resources: VI ITP and referral resources. On going.
- Continue training to ensure identification of children who are involved in substantiated cases of abuse and neglect or are identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure if needed. Resources: VI ITP staff. On going.
- Continue current efforts to maintain a comprehensive child find system and continue monitoring referral sources and current outreach efforts. Resources: VI ITP Territory and local staff. On going.

2010-2011

- Review progress, adjust targets and plan for future activities to ensure compliance. Resources: VI ITP. September 2010.
- Review strategies to promote public awareness activities for all children with all community resources, public and private. Resources: VI ITP and referral resources. On going.
- Continue training to ensure identification of children who are involved in substantiated cases of abuse and neglect or are identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure if needed. Resources: VI ITP staff. On going.
- Continue current efforts to maintain a comprehensive child find system and continue monitoring referral sources and current outreach efforts. Resources: VI ITP Territory and local staff. On going.

Part C State Performance Plan (SPP) for 2005-2010**Overview of the State Performance Plan Development:***(The following items are to be completed for each monitoring priority/indicator.)***Monitoring Priority: Effective General Supervision Part C / Child Find****Indicator 6:** Percent of infants and toddlers birth to 3 with IFSPs compared to national data.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent = [(# of infants and toddler birth to 3 with IFSPs) divided by the (population of infants and toddlers birth to 3)] times 100 compared to national data.

Overview of Issue/Description of System or Process:

See indicator 5 for a description of the Virgin Island's child find and identification system.

Baseline Data for FFY 2004 (2004-2005):

Using 6i18 Data from 2004, the Virgin Islands served 178 infants and toddlers, birth to 3, out of 5,087 children birth to three; the VI percent of infants and toddlers birth to 3 with IFSPs = 3.22%. National data (including at risk children from the number) show that the national percent of infants and toddlers birth to 3 with IFSPs is 2.3%. The Virgin Islands percent difference from the National percent is +.92%.

Discussion of Baseline Data:

Baseline data had been calculated based on the birth to three population excluding at risk. In preparing the APR, a clarification was issued. The baseline has been re-calculated based on the birth to three populations, including at risk and re-calculating the number of infants and toddlers birth to three with IFSPs to 164/5087 or 3.22%. The SPP baseline has been changed to reflect this clarification. Proposed targets for indicator 6 have been revised in the SPP to the "VI will meet or exceed the National percent of infants and toddlers birth to 3 with IFSPs"

The trend data for the last three years indicates that compared to the National average of birth to three population served, the Virgin Islands has consistently been above the National average, with a steady increase in the difference between percent served and the national average.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	VI will meet or exceed the National percent of infants and toddlers birth to 3 with IFSPs
2006 (2006-2007)	VI will meet or exceed the National percent of infants and toddlers birth to 3 with IFSPs

2007 (2007-2008)	VI will meet or exceed the National percent of infants and toddlers birth to 3 with IFSPs
2008 (2008-2009)	VI will meet or exceed the National percent of infants and toddlers birth to 3 with IFSPs
2009 (2009-2010)	VI will meet or exceed the National percent of infants and toddlers birth to 3 with IFSPs
2010 (2010-2011)	VI will meet or exceed the National percent of infants and toddlers birth to 3 with IFSPs

Improvement Activities/Timelines/Resources:

2005-2006

- Meet with representatives from the Virgin Islands Department of Human Services, Division of Family Services, to jointly plan for the timely referral of children who are involved in substantiated cases of abuse and neglect or is identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure. Resources: VI ITP and Division of Family Services. February 2006
- Identify and implement activities to ensure identification of children whose parents speak a language other than English, such as translating documents, identifying liaisons, and other community organizations to develop partnerships. Resources: VI ITP staff and VI ICC. On going
- Develop and implement a plan to systematically disseminate Spanish translations of VI ITP materials for families through Hispanic organizations and the Hispanic radio programs. Resources: VI ITP staff, VI Find, Hispanos Unidos. March 2006
- Examine the ICC membership to ensure ICC membership is representative of all children and families, including minority, low income, inner city, rural, homeless and children in foster care. Resource: VI ITP March 2006.

2006-2007

- Examine the ICC membership to ensure ICC membership is representative of all children and families, including minority, low income, inner city, rural, homeless and children in foster care. Resource: VI ITP February 2007.
- Meet with representatives from the Virgin Islands Department of Human Services, Division of Family Services, to jointly plan for the timely referral of children who are involved in substantiated cases of abuse and neglect or identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure. Resources: VI ITP and Division of Family Services February - March 2007
- Finalize plan for the timely referral of children who are involved in substantiated cases of abuse and neglect or identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure. Resources: VI ITP and Division of Family Services. March 2007
- Identify and implement activities to ensure identification of children whose parents speak a language other than English, such as translating documents, identifying liaisons, and other community organizations to develop partnerships. Resources: VI ITP staff and VI ICC. On going
- Develop and implement a plan to systematically disseminate Spanish translations of VI ITP materials for families through Hispanic organizations and the Hispanic radio programs. Resources: VI ITP staff, VI Find, Hispanos Unidos. April 2007

- Provide training to all early intervention staff and appropriate Department of Human Service staff on identification and referral of children who are involved in substantiated cases of abuse and neglect or is identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure, homeless or in foster care. Resources: VI ITP, Division of Family Services, NECTAC. April 2007
- Continue current efforts to maintain a comprehensive child find system and continue monitoring referral sources and current outreach efforts. Resources: VI ITP Territory and local staff. On going.

2007-2008

- Update plan for identifying deaf and hard of hearing children, homeless children and those in foster care. Resources: VI ITP. August 2007
- Develop specific strategies to promote public awareness activities with churches, public housing projects and shelters for the homeless. Resources: VI ITP and community. November 2007
- Revise targets and improvement activities if needed. Resource: VI ITP, other consultants as needed. January 2008
- Review effectiveness of training activities through monitoring of referrals, referral sources and parent interview. VI ITP April 2008
- Meet with Early Head Start staff to coordinate child find activities. Resources: VI ITP and Early Head Start staff. May 2008
- Continue training to ensure identification of children who are involved in substantiated cases of abuse and neglect or are identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure if needed. Resources: VI ITP staff. On going.
- Continue current efforts to maintain a comprehensive child find system and continue monitoring referral sources and current outreach efforts. Resources: VI ITP Territory and local staff. On going.

2008-2009

- Review strategies to promote public awareness activities for all children with all community resources, public and private. Resources: VI ITP and referral resources. On going.
- Review progress, adjust targets and plan for future activities to ensure compliance. Resources: VI ITP. September 2009
- Revise targets and improvement activities if needed. Resource: VI ITP, other consultants as needed. January 2010
- Continue training to ensure identification of children who are involved in substantiated cases of abuse and neglect or are identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure if needed. Resources: VI ITP staff. On going.
- Continue current efforts to maintain a comprehensive child find system and continue monitoring referral sources and current outreach efforts. Resources: VI ITP Territory and local staff. On going.

2009-2010

- Review strategies to promote public awareness activities for all children with all community resources, public and private. Resources: VI ITP and referral resources. On going.
- Continue training to ensure identification of children who are involved in substantiated cases of abuse and neglect or are identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure if needed. Resources: VI ITP staff. On going.
- Continue current efforts to maintain a comprehensive child find system and continue monitoring referral sources and current outreach efforts. Resources: VI ITP Territory and local staff. On going.

2010-2011

- Review progress, adjust targets and plan for future activities to ensure compliance. Resources: VI ITP. September 2010.
- Review strategies to promote public awareness activities for all children with all community resources, public and private. Resources: VI ITP and referral resources. On going.
- Continue training to ensure identification of children who are involved in substantiated cases of abuse and neglect or are identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure if needed. Resources: VI ITP staff. On going.
- Continue current efforts to maintain a comprehensive child find system and continue monitoring referral sources and current outreach efforts. Resources: VI ITP Territory and local staff. Ongoing
- Child Find Screening event in partnership with Department of Human Services, Department of Education, LSS of the VI, Community Foundation of the VI and other partners in Early Childhood help a Child Find held March 2010. Implemented

Part C State Performance Plan (SPP) for 2005-2010**Overview of the State Performance Plan Development:***(The following items are to be completed for each monitoring priority/indicator.)***Monitoring Priority: Effective General Supervision Part C / Child Find****Indicator 7:** Percent of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent = [(# of infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting was conducted within Part C's 45-day timeline) divided by the (# of infants and toddlers with IFSPs evaluated and assessed for whom an initial IFSP meeting was required to be conducted)] times 100.

Account for untimely evaluations, assessments, and initial IFSP meetings, including the reasons for delays.

Overview of Issue/Description of System or Process:

See Overview for Indicator #1. In addition to collecting data on compliance with the 45-day timeline through the child record review process conducted in March and April of 2005 in the St Thomas/St John and St Croix districts, the Part C program also initiated collecting data on the timely completion of evaluations and assessments and conducting initial IFSP meetings for all children who were referred after January 1 of 2005, using an excel-based data logging procedure. This data collection effort was required in the special conditions under which the Virgin Islands received its FFY 2003 grant award. These two sources of data have somewhat divergent findings regarding the Virgin Islands' compliance with Indicator #7. It also serves for monitoring purposes.

Baseline Data for FFY 2004 (2004-2005):

Data collected on all children entering the program between January 1 and March 31 2005 there were 45 instances where an evaluation and assessment was conducted. In 6 instances the child was found to be not eligible and in 5 instances an initial IFSP meeting was not held because the family declined services, leaving 34 instances where an initial IFSP was held. In 13 of those 34 instances the 45-day timeline was met. Of the 21 instances where the 45-day timeline was exceeded 8 were delayed due to family circumstances (which does not indicate noncompliance), 7 were delayed due to programmatic reasons, and, for 6 instances, the reasons for delay were not documented or not yet known. Depending on how the 6 not yet known instances are resolved, compliance according to these data could range from 62% to 79%. ($13 + 8/34 \times 100 = 61.7$) or $13 + 8 + 6/34 \times 100 = 79.4$).

The table below displays the data collected under the OSEP special conditions.

The Number of Children From January 1, 2005 To March 31, 2005 That:	Total
Were referred to the program	45

Were found to be not eligible	6
The parent declined services	5
Completed an IFSP	23
Completed IFSP within 45 days	13
Completed an IFSP, but exceeded 45 days	10
Have exceeded 45 days, and had not yet completed IFSP	11
Exceeded 45 days due to family circumstances	8
Exceeded 45 days due to program circumstances	7
Exceeded 45 days, but reason not yet known	6

Discussion of Baseline Data:

The data gathered under the OSEP special conditions requirements is considered to be reflective of the Virgin Islands current baseline for compliance with indicator #7. It is current since it reflects performance over a three-month period in early 2005. Also, the data included all children entering the program during the 3-month timeframe.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100% of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.
2006 (2006-2007)	100% of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.
2007 (2007-2008)	100% of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.
2008 (2008-2009)	100% of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.
2009 (2009-2010)	100% of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.
2010 (2010-2011)	100% of eligible infants and toddlers with IFSPs for whom an evaluation and assessment and an initial IFSP meeting were conducted within Part C's 45-day timeline.

Improvement Activities/Timelines/Resources:

2005-2006

- Continuation of the data collection activity currently being done under the OSEP special condition requirements regarding meeting the 45-day timeline. Resources: Program staff, service coordinators.
- Dissemination and clarification of the 45-day timeline requirement to all service coordinators and evaluation staff in both districts. March 2006. Resources: NECTAC, consultants, Territory Staff.
- Provide training to service coordinators, collect additional information from districts to determine causes for delays, develop corrective action plans. March – May 2006. Resources: NECTAC, consultants, Territory Staff.
- Monitor in conjunction with regular Child Record review monitoring. June 2006. Resources: Territory Staff.

2006-2007

- Develop plans for personnel recruitment and retention to ensure compliance. October 2006. Resources- ICC, Health Department administrator, ITP staff, NECTAC.
- Continue data collection currently in place for special conditions.
- Monitor in conjunction with regular Child Record review monitoring. Analyze data to determine need for training. June 2007. Resources: Territory Staff.
- Explore need for external monitors as needed

2007-2008

- Continue monitoring activities according to monitoring schedule
- Continue personnel recruitment activities
- Continue data collection currently in place for special conditions. and incorporate into regular monitoring activities
- Monitor in conjunction with regular Child Record review monitoring. Analyze data to determine need for training. June 2008. Resources: Territory Staff.

2008-2009

- Continue monitoring activities according to monitoring schedule
- Continue data collection currently in place
- Monitor in conjunction with regular Child Record review monitoring. Analyze data to determine need for training. June 2009. Resources: Territory Staff.

2009-2010

- Continue monitoring activities according to monitoring schedule
- Continue data collection currently in place
- Monitor in conjunction with regular Child Record review monitoring. Analyze data to determine need for training. June 2010. Resources: Territory Staff.

2010-2011

- Continue monitoring activities according to monitoring schedule
- Continue data collection currently in place
- Monitor in conjunction with regular Child Record review monitoring. Analyze data to determine need for training. June 2011. Resources: Territory Staff.

Part C State Performance Plan (SPP) for 2005-2010**Overview of the State Performance Plan Development:***(The following items are to be completed for each monitoring priority/indicator.)***Monitoring Priority: Effective General Supervision Part C / Effective Transition**

Indicator 8: Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:

- A. IFSPs with transition steps and services;
- B. Notification to LEA, if child potentially eligible for Part B; and
- C. Transition conference, if child potentially eligible for Part B.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

- A. Percent = $[(\# \text{ of children exiting Part C who have an IFSP with transition steps and services}) \div (\# \text{ of children exiting Part C})] \times 100$.
- B. Percent = $[(\# \text{ of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred}) \div (\# \text{ of children exiting Part C who were potentially eligible for Part B})] \times 100$.
- C. Percent = $[(\# \text{ of children exiting Part C and potentially eligible for Part B where the transition conference occurred}) \div (\# \text{ of children exiting Part C who were potentially eligible for Part B})] \times 100$.

Account for untimely transition conferences, including reasons for delays.

Overview of Issue/Description of System or Process:

See overview to indicator #1. The Part C 618 Exit Table for 2004 indicated that 40 children exited the Part C program being found eligible for Part B and another 42 exited with their eligibility for Part B still not determined. Eight children found not eligible for Part B exited with referrals to other programs, and 5 children found not eligible for Part B exited with no referrals. Thirty-one children exited prior to maximum age because they had completed their IFSPs and 27 children exited for other reasons for a total of 153 children leaving the Part C program in FFY 2004.

Baseline Data for FFY 2004 (2004-2005):

Of the 41 child records reviewed in March and April of 2005, 20 records were of children who had exited the program, 6 from the St Thomas/St John district and 14 from the St Croix district. All 20 children were potentially eligible for Part B. It is the findings from the review of those 20 records that yielded the following baseline data for indicator #8.

- A. Seventy-five percent (15 of 20) records reviewed indicated that the child's IFSP contained a transition plan. $(15/20 \times 100 = 75\%)$
- B. Forty-five percent (9 of 20) records reviewed documented that the local education agency was notified about the child. $(9/20 \times 100 = 45\%)$

Fifteen percent (3 of 20) records reviewed indicated that a planning conference was held at least 90 days prior to the child's third birthday. However, 17 additional conferences were held, but these occurred less than 90 days before the child's third birthday. $(3/20 \times 100 = 15\%)$

Discussion of Baseline Data:

The baseline data indicates noncompliance with items A, B, and C of indicator #8. The instances of noncompliance identified from the child record reviews may be due in part to a failure to properly document in the child's record transition planning that did occur, such as documenting that the local education agency was notified. The baseline data also shows that, while transition conferences are being held, they are often too late to meet the requirement of at least 90 days prior to the third birthday.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100% of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including: A. 100% of all children with IFSPs with transition steps and services; B. 100% of all children potentially eligible for Part B, notification will be given to LEA; and C. 100% of all children potentially eligible for Part B will have a timely transition conference,.
2006 (2006-2007)	100% of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including: A.100% of all children with IFSPs with transition steps and services; B.100% of all children potentially eligible for Part B, notification will be given to LEA; and C.100% of all children potentially eligible for Part B will have a timely transition conference,
2007 (2007-2008)	100% of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including: A.100% of all children with IFSPs with transition steps and services; B.100% of all children potentially eligible for Part B, notification will be given to LEA; and C.100% of all children potentially eligible for Part B will have a timely transition conference,
2008 (2008-2009)	100% of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including: A.100% of all children with IFSPs with transition steps and services; B.100% of all children potentially eligible for Part B, notification will be given to LEA; and C.100% of all children potentially eligible for Part B will have a timely transition conference,
2009	100% of all children exiting Part C who received timely transition planning to support

(2009-2010)	<p>the child's transition to preschool and other appropriate community services by their third birthday including:</p> <p>A.100% of all children with IFSPs with transition steps and services; B.100% of all children potentially eligible for Part B, notification will be given to LEA; and C.100% of all children potentially eligible for Part B will have a timely transition conference,</p>
<p>2010 (2010-2011)</p>	<p>100% of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday including:</p> <p>A.100% of all children with IFSPs with transition steps and services; B.100% of all children potentially eligible for Part B, notification will be given to LEA; and C.100% of all children potentially eligible for Part B will have a timely transition conference,</p>

Improvement Activities/Timelines/Resources:

2005-2006

- Continue Child Record review monitoring in each district. Resources: VI ITP staff, local staff, NECTAC. Monitoring will occur according to regular monitoring schedule. Ongoing.
- Develop plans for joint monitoring to monitor transition for all children who transition the program into special education. Resources: VI ITP, Director of Special Education, NECTAC
- Identify additional external monitors for child record reviews; provide training. Resources: VI ITP staff, NECTAC, other identified trainers. January to June 2006.
- Identify monitoring activities and sources of data to verify accuracy of information in Child Record Review (such as parent interviews, review of reimbursement data). Resources: VI ITP staff, NECTAC, SERRC. June, 2006
- Develop Plans for recruitment and training of early intervention staff to ensure adequate staff. Resources: VI ITP staff, VI Health Department administration, SERRC.

2006-2007

- Update Child Record review form. Resources: NECTAC, VI ITP, other consultants as needed.
- Convene a joint committee from Preschool Special Education Program, VI ITP and parents to develop procedures products to ensure requirements are met for the transition process for both programs. Resources: VI ITP, Preschool Program, SERRC, NECTAC. February 2007
- Train staff (Early intervention and Special Education) on transition requirements and monitoring activities for transition specifically related to noncompliance. Resources: VI ITP, NECTAC. VI Special Education Program staff. June 2007.
- Continue to identify monitoring activities and sources of data to verify accuracy of information in Child Record Review (such as parent interviews, review of reimbursement data). March 2007
- Revise targets and activities for transition, if needed. Resources: VI ITP, other consultants as needed. January 2007

2007-2008

- Continue Child Record review monitoring. Resources: VI ITP staff, local staff, NECTAC.
(Continuing each year)

- Revise targets and activities if needed. Resources: VI ITP, other consultants as needed. January 2008
- Convene a joint committee composed Preschool Special Education Program, VI ITP staff and parents to develop materials to for parents to explain transition and plans for training families Resources: VI ITP, Preschool Program, SERRC, NECTAC May 2008

2008-2009

- Continue Child Record review monitoring Resources: VI ITP staff. (Continuing each year.)
- Implement training on transition procedures for families. Resources: VI ITP staff and VI Special Education preschool staff, PTI. February 2009
- Implement activities for parent training on transition. Resources: VI ITP, Preschool Program, SERRC, NECTAC. January 2008
- Plan joint meeting with Head Start, VI Preschool program and community programs to ensure a smooth transition from EI to Preschool and other community programs. Resources: VI ITP, Head Start, VI Special Education Preschool staff. November 2008
- Develop procedure to ensure transition steps occur according to the Transition plan. Resources VI ITP staff, local staff. March, 2009
- Revise targets and activities if needed. Resources: VI ITP. NECTAC other consultants as needed. January 2009

2009-2010

- Continue monitoring activities according to monitoring schedule. Resources: VI ITP staff, local staff, NECTAC. (Continuing each year)
- Revise targets and activities if needed. Resources: VI ITP. other consultants as needed. January 2010

2010-2011

- Continue monitoring activities according to monitoring schedule. Resources: VI ITP staff, local staff, NECTAC. (Continuing each year)
- Revise targets and activities if needed. Resources: VI ITP, other consultants as needed. January 2011

Part C State Performance Plan (SPP) for 2005-2010**Overview of the State Performance Plan Development:***(The following items are to be completed for each monitoring priority/indicator.)***Monitoring Priority: Effective General Supervision Part C / General Supervision**

Indicator 9: General supervision system (including monitoring, complaints, hearings, etc.) identifies and corrects noncompliance as soon as possible but in no case later than one year from identification.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

Percent of noncompliance corrected within one year of identification:

- a. # of findings of noncompliance.
- b. # of corrections completed as soon as possible but in no case later than one year from identification.

Percent = [(b) divided by (a)] times 100.

States are required to use the "Indicator 9 Worksheet" to report data for this indicator (see Attachment A).

Overview of Issue/Description of System or Process:

The Virgin Islands Part C Program is divided into two districts: St Thomas/St John and St Croix. The December 1 child count (birth to age 36 months) indicated 178 infants and toddlers being served, representing 3.5% of VI's birth to 36 months population. The Part C Program has been challenged for many years with being able to recruit and retain sufficient numbers of qualified personnel to serve its eligible infants and toddlers, and consequently to always provide its early intervention services in a timely fashion. The FFY 2003 Part C grant to the Virgin Islands was approved by OSEP with special conditions in the areas of financial management, property management, recruiting and hiring, and data collection and reporting.

From November 2004 through February 2005 The Virgin Island Part C Coordinator, with technical assistance from the National Early Childhood Technical Assistance System (NECTAC), developed a new child record review form to be used in monitoring the performance of the Part C program regarding compliance with Part C regulatory requirements.

From 2005 through October 2007, the VI Infants and Toddlers Program, with the assistance of a consultant and NECTAC technical assistance, refined the components for identifying noncompliance. These include: (1) reviewing and modifying policies and procedures, as needed; (2) developing and providing written guidance manuals regarding SPP/APR Indicators 1, 2, 3, 4, 7, 8, 9, 10, 11, 13 and 14; (3) conducting ongoing monitoring procedures such as continuous communication with service coordinators, periodic case conferences and meetings with early intervention personnel; (4) collecting data from monthly self-assessments and record reviews; (5) conducting a comprehensive record review; (6) implementing a short and long-term personnel recruitment and retention plan; and (8) evaluating and continuing the collaboration with the Virgin Islands Department of Education (VIDE) around early childhood transition (SPP/APR Indicator 8).

The Virgin Islands Infants and Toddlers Program has (1) strengthened and clarified its policies and procedures; (2) conducted training for all staff regarding policies, procedures and guidelines; (3) streamlined Individualized Family Service Plan forms (IFSP) and other documentation to ensure consistency of data collection; (5) modified its child record review procedures to ensure alignment with SPP/APR Indicators, Part C related requirements, and all other Part C requirements; (6) instituted a monthly self-assessment process to prevent re-occurrence of noncompliance; and, (7) provided ongoing refresher training for staff regarding statutory changes in IDEA 2004 and other statutory, regulatory and reporting requirements.

The Virgin Islands Infants and Toddlers Program has developed procedures to prevent the occurrence of noncompliance. These are: (1) the two service coordinators report to the Part C Coordinator monthly regarding the number of referrals that were received and the number of IFSP's that were completed during that month; (2) the service coordinators convene monthly meetings with service providers to discuss the status of evaluations and assessments and early intervention services, to conduct problem solving, and to discuss best practices for serving children and families; and, (3) the service coordinators may also spot check with families to ensure services were provided.

The VI Infants and Toddlers Program has a system in place to provide guidance, technical assistance and follow-up to correct noncompliance. If any problem or noncompliance is identified from analyses of its general supervision data, the Part C Coordinator and/or service coordinator contacts or meets with the staff involved as soon as possible. It is the Virgin Islands Infants and Toddlers Program's policy to take these actions based on the identification of noncompliance:

For any area of noncompliance, The VI Infants and Toddlers Program Part C Coordinator (ITP Director) requires the district to assure that the individual child receives the services that were untimely. Subsequently, The VI Infants and Toddlers Program Part C Coordinator reviews individual records of each child whose services were untimely to confirm that the services not implemented in a timely manner (i.e. evaluation and assessment, initial IFSP meeting, early intervention services, and/or transition conference) were subsequently provided, although late. In addition, upon completion of any corrective actions or improvement activities, data is gathered from subsequent individual child records and IFSPs from each district. These reviews determine whether children who were referred after the VI Infants and Toddlers Program identified the non-compliance are receiving timely evaluation and assessment and initial IFSP meeting within 45 days, timely services as documented on the IFSP, and/or a timely transition conference. In this manner the VI Infants and Toddlers Program ensures that the districts are currently implementing the statutory/regulatory requirements.

If the issue cannot be resolved within 30 days, the Part C Coordinator prepares a written memorandum of a finding to the responsible staff person within 60-days of the first meeting with staff to ensure that correction is addressed within one year of initial identification. The Virgin Islands Infants and Toddlers Program define a finding as written documentation that includes a conclusion that noncompliance has occurred for a specific child related to a statutory or regulatory Part C requirement. The documentation includes the date the document was written, initial of the child, the statutory or regulatory citation that was violated, and a description of the quantitative and/or qualitative data supporting the conclusion that there was noncompliance for the child. Findings can be determined based upon data reported in each SPP/APR indicators, monitoring, and dispute resolution processes.

When a finding is made, the VI ITP requires correction of all findings of noncompliance as soon as possible but no later than one year from identification (the date of written documentation concluding a

finding of noncompliance has occurred). The VI Infants and Toddlers Program administrator notifies in writing the early intervention personnel of any areas of noncompliance and further meets with all personnel to convey the areas of noncompliance and improvement and correction needed. To verify correction of noncompliance for individual children, the Virgin Islands reviews each child's record for whom noncompliance was identified to ensure that correction was made (e.g., transition steps are added to the child's IFSP). To verify correction for timeline requirements (e.g., 45 day timeline, timely services, and transition conferences), the Virgin Islands reviews additional child records to ensure correction of noncompliance. Individual child records for whom noncompliance was identified are also reviewed to ensure that the child had an evaluation and assessment, IFSP developed, received the services, or had a transition conference although not timely. The VI ITP Director sends a written letter to each district office stating that the noncompliance has been corrected within the year timeframe.

If a district office is not able to correct the noncompliance within one year of notification, the VI ITP Director sends a written notice that the district office must continue to work on correction and may require additional improvement activities or sanctions (i.e. more frequent on-site monitoring). The Virgin Islands ITP imposes one or more the following sanctions: (1) increases the number of on-site visits; (2) requires targeted record reviews; (3) mandates targeted training; (4) requires staff to provide data more frequently; and (5) terminates employment, if necessary. VIDH has the authority to withhold payments from its per diem providers if any substantiated questions arise regarding delivery of early intervention services. According to VIDH, this enforcement action has not yet been required.

Baseline Data for FFY 2004 (2004-2005):

From November 2004 through February 2005 The Virgin Island Part C Coordinator, with technical assistance from the National Early Childhood Technical Assistance System (NECTAC), developed a new child record review form to be used in monitoring the performance of the Part C program regarding compliance with Part C regulatory requirements. The new record review form was used to review a sample of 41 child records in the St Thomas/St John district and in the St Croix district. This represents approximately 23% of the children being served, based on the Virgin Islands' December 1, 2004, 618 child count data. Record reviews were conducted in March and April of 2005. The sample of included infants and toddlers that had recently entered the program, those that had been receiving services for more than six months, and those who had transitioned from the program. The sample was also proportional to the numbers of infants and toddlers being served in each district.

The baseline data used here came from child record reviews, except for data regarding the 45-day timeline requirement, which was collected as part of the special conditions imposed by OSEP with the awarding of the Virgin Islands FFY 2003 Part C grant (See indicator #7). Since The Virgin Islands Part C program has but two districts and serves a small number of children, the baseline data tables for Indicator #9 below reflect the total findings of noncompliance for the entire territory.

Noncompliance related to monitoring priority areas and indicators

Compliance Indicator	Baseline Percent of Compliance	Total Findings of Noncompliance
1. Percent of infants and toddlers with IFSPs who receive the early intervention services on their IFSPs in a timely manner.	81%	7
7. Percent of eligible infants and toddlers with IFSPs for whom assessment and	62%	13

evaluation and an initial IFSP meeting were conducted within Part C's 45-day timeline.		
8A. Percent of all children exiting Part C who received timely transition planning to support the child's transition to preschool and other appropriate community services by their third birthday	75%	5
8B. Percent of children exiting Part C and potentially eligible for Part B where notification to the LEA occurred	45%	11
8C. Percent of children exiting Part C and potentially eligible for Part B where a timely transition conference occurred	15%	17

Noncompliance related to areas not included in the monitoring priority areas and indicators

Compliance Area	Baseline Percent of Compliance	Total Findings of Noncompliance
a. The IFSP must include a statement of the child's present levels of physical development (including vision, hearing, and health status), cognitive development, communication development, social development, and adaptive development. 303.344(a)	82%	35
b. A review of the IFSP for the child and the child's family must be conducted every six months or more frequently if conditions warrant, or if the family requests such a review. 303.342(b)	15%	22
c. A meeting must be conducted on at least an annual basis to evaluate the	42%	7

IFSP for the child and the child's family (303.342©)		
d. IFSPs include an appropriate justification when an early intervention service is not provided in the natural environment in accordance with 34 CFR 303.344 (d)(1)(ii)	11%	8

Noncompliance identified through other mechanisms (complaints, due process hearings, mediations, etc.)

Since the Virgin Islands has not yet had a formal complaint filed or conducted any due process hearings and/or mediations, no instances of noncompliance have been so identified.

Discussion of Baseline Data:

Baseline data for indicator #9 can only reflect the identification of noncompliance at this time. It cannot yet reflect the percent of noncompliance corrected, since all instances of noncompliance being reported were identified in March and April of 2005. Subsequent data that could indicate the extent to which the identified noncompliance has been corrected has not yet been gathered.

A. Noncompliance related to monitoring priority areas and indicators

Noncompliance related to monitoring priority areas and indicators was identified in compliance indicators #1, #7, #8A, #8B, and #8C. Information regarding the findings for these indicators is provided in the SPP under those respective indicators.

B. Noncompliance related to areas not included in the monitoring priority areas and indicators

a. IFSPs include statements of present levels of functioning in all 5 developmental domains in accordance with 34 CFR 303.344(a)

Since a statement regarding the present level of functioning is necessary for each of the 5 developmental domains, each domain represents an opportunity for either compliance or noncompliance. Thus, each child's IFSP contains 5 opportunities for compliance or noncompliance regarding 34 CFR 303.344(a). Compliance rates (have been calculated according this understanding of compliance.

Data for the baseline compliance rate is based on the review of 39 records in April of 2005. Those records contain a total of 195 opportunities for compliance (39 x 5=195). Of those 195 opportunities for compliance 160 instances of compliance and 35 instances of noncompliance were identified for a compliance rate of 82%. Noncompliance related to having a statement of present levels of development occurred primarily in the area of physical development. This was due to the lack of documentation that children had received vision and hearing evaluations.

b. A periodic IFSP review is conducted every six months in accordance with 34 CFR 303.342(b)

Data for the baseline compliance rate is based on the review of 26 child records in April of 2005. In each case the child had had an IFSP for more than 6 months. Of the 26 records reviewed, 4 children had had an IFSP review at least every six months and 22 had not, for a baseline compliance of 15%. Noncompliance regarding the conducting of timely six-month reviews was extensive in both districts.

In many cases the records showed that such reviews had been conducted, but not within the specified timeframes.

c. An IFSP meeting is held annually to review the IFSP in accordance with 34 CFR 303.342 (c)

Data for the baseline compliance rate is based on the review of 12 child records in April of 2005. In each case the child had had an IFSP for more than one year. Of the 12 records reviewed, 5 children had received a timely annual IFSP meeting and 7 had not, for a baseline compliance of 42%. Noncompliance regarding the conducting of timely annual evaluation meeting was extensive in both districts. In many cases the records showed that such reviews had been conducted, but not within the specified timeframes.

a. IFSPs include an appropriate justification when an early intervention service is not provided in the natural environment in accordance with 34 CFR 303.344 (d)(1)(ii)

Data for the baseline compliance rate is based on the review of 39 child records in April of 2005. Nine of those records contained a service location that was not a natural environment. All 9 records were for children served in the St Thomas/St John district. Only one of those 9 records contained a justification; the rest did not, yielding a baseline compliance rate of 1/9 or 11%.

Summary

The development of the new child record review form represents significant progress in the Virgin Islands Part C Program's capacity to be able to identify instances of noncompliance. The Program's performance in correcting, in a timely fashion, those instances of noncompliance identified through the recent pilot effort cannot be reported yet, since they were only just identified. However, continued and expanded use of the new child record review form will provide concrete data in the near future, showing whether or not such instances of noncompliance persist or not.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100% of noncompliance identified and corrected within one year of identification
2006 (2006-2007)	100% of noncompliance identified and corrected within one year of identification
2007 (2007-2008)	100% of noncompliance identified and corrected within one year of identification
2008 (2008-2009)	100% of noncompliance identified and corrected within one year of identification
2009 (2009-2010)	100% of noncompliance identified and corrected within one year of identification
2010	100% of noncompliance identified and corrected within one year of identification

(2010-2011)	
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Improvement Activities/Timelines/Resources:

(Improvement activities related to this indicator are also found in all other indicators particularly those with noncompliance issues.)

2005-2006

- Continue Child Record review monitoring in each district. Resources: VI ITP staff, local staff, NECTAC. Monitoring will occur according to regular monitoring schedule. Ongoing.
- Continuation of the data collection activity currently being done under the OSEP special condition requirements regarding the initiation of IFSP services. Resources: VI ITP staff
- Identify additional external monitors for child record reviews; provide training. Resources: VI ITP staff, NECTAC, other identified trainers. January to June 2006.
- Refine and expand the Excel based data collection (or other appropriate electronic method) currently being used to collect data regarding special conditions and other suitable data items. VI ITP staff, February 2006.
- Provide training to service coordinators, collect additional information from districts to determine causes for delays, develop corrective action plans. March – May 2006. Resources – NECTAC, consultants, Territory Staff.

2006-2007

- Develop Plans for recruitment and training of early intervention staff to ensure adequate staff. (including data manager) October 2006 Resources: VI ITP staff, VI Health Department administration
- Continuation of the data collection activity currently being done under the OSEP special condition requirements regarding the initiation of IFSP services. Resources: VI ITP staff
- Continue Child Record review monitoring in each district. Resources: VI ITP staff, local staff, NECTAC. Monitoring will occur according to regular monitoring schedule. Ongoing.
- Update Child Record review form. Resources: NECTAC, VI ITP, other consultants as needed.
- Continue to identify monitoring activities and sources of data to verify accuracy of information in Child Record Review. (such as parent interviews, review of reimbursement data.) March 2007
- Continue training to service coordinators, collect additional information from districts to determine causes for noncompliance, develop corrective action plans. March – May 2007. Resources – NECTAC, consultants, Territory Staff.
- Provide orientation and training to all staff regarding new Part C rules and their implications for what constitutes compliance and identifying and correcting noncompliance (whenever final rules from OSEP are available)

2007-2008

- Continue Child Record review monitoring in each district. Review and refine forms, identify and implement other data verification activities. Resources: VI ITP staff, local staff, NECTAC. Monitoring will occur according to regular monitoring schedule. Ongoing
- Identify additional external monitors for child record reviews; provide training. Resources: VI ITP staff, NECTAC, other identified trainers. January to June 2008.
- Revise activities if needed. Resource: VI ITP, other consultants as needed. January 2008

2008-2009

- Continue regular monitoring schedule, using child record reviews, and other monitoring procedures to meet of requirements. Resources: VI ITP, Ongoing.
- Continue training of external monitors as needed. Resources: VI ITP, NECTAC, other consultants
- Revise activities if needed. Resource: VI ITP, other consultants as needed. January 2009

2009-2010

- Continue regular monitoring schedule, using child record reviews, and other monitoring procedures to meet of requirements. Resources: VI ITP, Ongoing.

2010-2011

Continue regular monitoring schedule, using child record reviews, and other monitoring procedures to meet of requirements. Resources: VI ITP, Ongoing.

Part C State Performance Plan (SPP) for 2005-2010**Overview of the State Performance Plan Development:***(The following items are to be completed for each monitoring priority/indicator.)***Monitoring Priority: Effective General Supervision Part C / General Supervision****Indicator 10:** Percent of signed written complaints with reports issued that were resolved within 60-day timeline or a timeline extended for exceptional circumstances with respect to a particular complaint.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(1.1(b) + 1.1(c)) divided by 1.1] times 100.**Overview of Issue/Description of System or Process:**

The Virgin Islands Part C program has not yet received a formal written complaint. The Virgin Islands has recently revised its notice of parent rights, including procedures for filing a formal written complaint. Written notice of parents' rights document submitted under separate cover.

Baseline Data for FFY 2004 (2004-2005):

Percent = 0%

Discussion of Baseline Data:

There were no signed written complaints filed in the Virgin Islands during FFY 2004.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%

2010 (2010-2011)	100%
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Improvement Activities/Timelines/Resources:**2005-2006**

- Establish procedures in the central office for logging and tracking formal written complaints and procedures for informing parents of their rights as their child enters and progresses through the program, including providing the family with their own copy of the notice of parent rights. Resources: VI ITP. January 2006
- Orientation and training of service coordinators, staff and PTI regarding the revised notice of parent rights and the procedures for informing parents of their rights.(Prior Notice requirement) Resources: VI ITP, NECTAC, consultants February 2006.
- Continue Child Record review monitoring to collect data on parents receiving notice of parent rights and all requirements related to prior notice. Resources: VI ITP, local staff, NECTAC. Ongoing.

2006-2007

- Review and update child record review form to ensure all needed data is collected. VI ITP
- Conduct child record reviews as part of regular monitoring schedule to identify and correct non-compliance for all requirements. Resources: VI ITP. September, October of 2006
- Analyze data on parents reported understanding of requirements. Revise training and implement, if needed, Resources: VI ITP, NECTAC. February 2007
- Continue Child Record review monitoring. Resources: VI ITP, local staff, (NECTAC, if needed.) Ongoing
- Review and refine written procedures for the monitoring system, including monitoring schedule, requirements for correction of noncompliance, corrective action procedures, technical assistance provision, and sanctions. Resources: VI ITP, other support, as needed. August, 2007
-

2007-2008

- Develop method to track informal parent concerns and their resolution- as part of monitoring parents understanding of their rights and to ensure child complaints are filed when appropriately. Resources: VI ITP April 2008
- Continue Child record review monitoring to collect data on concerning parents receiving notice of parent rights and all requirements related to parent rights. Resources: VI ITP, local staff. Ongoing.
- Review and revise targets and indicators as needed. Resources: VI ITP January 2008

2008-2009

- Conduct parent focus groups to identify issues concerning procedural safeguards Resources: VI ITP, PTI October 2008.
- Continue Child record review monitoring to collect data on parents receiving notice of parent rights and all requirements related to parent rights. Resources: VI ITP, local staff. Ongoing.

2009-2010

- Continue Child record review monitoring to collect data on parents receiving notice of parent rights and all requirements related to parent rights. Resources: VI ITP, local staff. Ongoing.
- Review and revise Targets and Improvement activities, as needed. Resources: VI ITP. January 2010

2010-2011

- Continue Child record review monitoring to collect data on parents receiving notice of parent rights and all requirements related to parent rights. Resources: VI ITP, local staff. Ongoing.

- Review and revise Targets and Improvement activities, as needed. Resources: VI ITP. January 2011

Part C State Performance Plan (SPP) for 2005-2010**Overview of the State Performance Plan Development:***(The following items are to be completed for each monitoring priority/indicator.)***Monitoring Priority: Effective General Supervision Part C / General Supervision****Indicator 11:** Percent of fully adjudicated due process hearing requests that were fully adjudicated within the applicable timeline.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(3.2(a) + 3.2(b)) divided by 3.2] times 100.**Overview of Issue/Description of System or Process:**

The Virgin Islands Part C program has not yet received a due process hearing request to fully adjudicate. The Virgin Islands has recently revised its notice of parent rights, including procedures for filing an individual child complaint requesting a due process hearing. Written notice of parents rights document has been submitted under separate cover.

Baseline Data for FFY 2004 (2004-2005):

%=0

Discussion of Baseline Data:

There were no due process hearing requests in the Virgin Islands during FFY 2004.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%

<p>2010 (2010-2011)</p>	<p>100%</p>
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Improvement Activities/Timelines/Resources:**2005-2006**

- Establish procedures in the central office for logging and tracking requests for due process hearings. Resources: VI ITP. January 2006
- Identify, orient, and train a pool of due process hearing officers. Resources: VI ITP. July 2006
- Orientation and training of service coordinators, staff and PTI regarding the revised notice of parent rights, and procedures for informing parents of their rights, due process. Resources: VI ITP, NECTAC, consultants February 2006.
- Continue Child Record review monitoring to collect data on parents receiving notice of parent rights and all requirements related to due process. Resources: VI ITP, local staff, NECTAC. Ongoing.

2006-2007

- Review and update child record review form to ensure all needed data is collected related to mediation, due process and parents rights. Resources: VI ITP Ongoing.
- Analyze data on due process hearing requests. Revise training for early intervention staff and implement, if needed, Resources: VI ITP. NECTAC. February 2007
- Continue Child Record review monitoring. Resources: VI ITP, local staff, (NECTAC, if needed.) Ongoing.
- An information packet will be developed to orient, and train due process hearing officers. Resources: VI ITP, consultants. April 2007
- Training of due process hearing officers will be conducted. Resources: VI ITP, consultants. May 2007.
- Develop method to interview parents regarding mediation, due process and prior notice. Include in monitoring procedures. Resources: VI ITP. May 2007.

2007-2008

- Develop method to track informal parent concerns and their resolution- as part of monitoring parents understanding of their rights to due process and to ensure child complaints are filed appropriately. Resources: VI ITP April 2008
- Continue Child record review monitoring to collect data on due process. Resources: VI ITP, local staff. Ongoing.
- Review and revise Targets and Improvement activities, as needed. Resources: VI ITP. January 2008.

2008-2009

- Conduct parent focus groups to identify issues concerning parents' rights and the delivery of services. Resources: VI ITP, PTI, October 2008
- Continue Child record review monitoring to collect data on parents receiving notice of parent rights and all requirements related to parent rights. Resources: VI ITP, local staff. Ongoing.
- Review and revise Targets and Improvement activities, as needed. Resources: VI ITP. January 2009.

2009-2010

- Continue Child record review monitoring to collect data on parents receiving notice of parent rights and all requirements related to parent rights. Resources: VI ITP, local staff. Ongoing.
- Review and revise Targets and Improvement activities, as needed. Resources: VI ITP. January 2010

2010-2011

- Continue Child record review monitoring to collect data on parents receiving notice of parent rights and all requirements related to parent rights. Resources: VI ITP, local staff. Ongoing.
- Review and revise Targets and Improvement activities, as needed. Resources: VI ITP. January 2010

Part C State Performance Plan (SPP) for 2005-2010**Overview of the State Performance Plan Development:***(The following items are to be completed for each monitoring priority/indicator.)***Monitoring Priority: Effective General Supervision Part C / General Supervision****Indicator 12:** Percent of hearing requests that went to resolution sessions that were resolved through resolution session settlement agreements (applicable if Part B due process procedures are adopted).

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = (3.1(a) divided by 3.1) times 100.**Overview of Issue/Description of System or Process:**

Not applicable (NA)

Baseline Data for FFY 2004 (2004-2005): NA**Discussion of Baseline Data:** NA

FFY	Measurable and Rigorous Target
2005 (2005-2006)	NA
2006 (2006-2007)	NA
2007 (2007-2008)	NA
2008 (2008-2009)	NA
2009 (2009-2010)	NA
2010 (2010-2011)	NA

Improvement Activities/Timelines/Resources: NA**Part C State Performance Plan (SPP) for 2005-2010****Overview of the State Performance Plan Development:***(The following items are to be completed for each monitoring priority/indicator.)***Monitoring Priority: Effective General Supervision Part C / General Supervision****Indicator 13:** Percent of mediations held that resulted in mediation agreements.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement: Percent = [(2.1(a)(i) + 2.1(b)(i)) divided by 2.1] times 100.**Overview of Issue/Description of System or Process:**

Since The Virgin Islands Part C program has not yet received a due process hearing request, it has never held mediation. The Virgin Islands has recently revised its notice of parent rights, including procedures for requesting mediation. Written notice of parent rights document has been submitted under separate cover.

Baseline Data for FFY 2004 (2004-2005):

%=0

Discussion of Baseline Data:

There were no mediations held in the Virgin Islands during FFY 2004.

There continued to be no mediations held in the Virgin Islands during FFY 2005

FFY	Measurable and Rigorous Target
2005 (2005-2006)	No targets necessary at this time.
2006 (2006-2007)	No targets necessary at this time.
2007 (2007-2008)	No targets necessary at this time.
2008 (2008-2009)	No targets necessary at this time.
2009 (2009-2010)	No targets necessary at this time.

2010 (2010-2011)	No targets necessary at this time.
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Improvement Activities/Timelines/Resources:**2005-2006**

- Establish procedures in the central office for logging and tracking requests for mediations. Resources: VI ITP. January 2006
- Identify, orient, and train a pool of due process hearing officers. Resources: VI ITP. July 2006
- Orientation and training of service coordinators, staff and PTI regarding the revised notice of parent rights, mediation requirements, and procedures for informing parents of their rights. Resources: VI ITP. NECTAC, consultants February 2006.
- Continue Child Record review monitoring to collect data on parents receiving notice of parent rights and all requirements related to mediation. VI ITP, local staff, NECTAC. Ongoing.

2006-2007

- Review and update child record review form to ensure all needed data is collected related to mediation, due process and parent rights. Resources: VI ITP Ongoing.
- Analyze data on mediation requests. Revise training for early intervention staff and implement, if needed, Resources: VI ITP. NECTAC. February 2007
- Train mediators on new Part C regulations (if issued) Resources: VI ITP, NECTAC. July 2007
- Continue Child Record review monitoring to collect data on parents receiving notice of parent rights and all requirements related to mediation. Resources: VI ITP, local staff, NECTAC. Ongoing.
- Develop method to interview parents regarding mediation, due process and prior notice. Include in monitoring procedures. Resources: VI ITP, NECTAC May 2007.

2007-2008

- Develop method to track informal parent concerns and their resolution- as part of monitoring parents' understanding of their rights to mediation and to ensure child complaints are filed appropriately. Resources: VI ITP April 2008
- Continue Child record review monitoring to collect data on parents receiving notice of parent rights and all requirements related to parent rights, including mediation. Resources: VI ITP, local staff. Ongoing.
- Review and revise Targets and Improvement activities, as needed. Resources: VI ITP. January 2008.

2008-2009

- Conduct parent focus groups to identify issues concerning parents' rights and the delivery of services. VI ITP, PTI, October 2008
- Continue Child record review monitoring to collect data on parents receiving notice of parent rights and all requirements related to parent rights. VI ITP, local staff. Ongoing.
- Review and revise Targets and Improvement activities, as needed. Resources: VI ITP. January 2009.

2009-2010

- Continue Child record review monitoring to collect data on parents receiving notice of parent rights and all requirements related to parent rights. Resources: VI ITP, local staff. Ongoing.

- Review and revise Targets and Improvement activities, as needed. Resources: VI ITP. January 2010

2010-2011

- Continue Child record review monitoring to collect data on parents receiving notice of parent rights and all requirements related to parent rights. Resources: VI ITP, local staff. Ongoing.
- Review and revise Targets and Improvement activities, as needed. Resources: VI ITP. January 2011

Part C State Performance Plan (SPP) for 2005-2010**Overview of the State Performance Plan Development:**

(The following items are to be completed for each monitoring priority/indicator.)

Monitoring Priority: Effective General Supervision Part C / General Supervision
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Indicator 14: State reported data (618 and State Performance Plan and Annual Performance Report) are timely and accurate.

(20 U.S.C. 1416(a)(3)(B) and 1442)

Measurement:

State reported data, including 618 data, State performance plan, and annual performance reports, are:

- Submitted on or before due dates (February 1 for child count and settings and November 1 for exiting and dispute resolution); and
- Accurate, including covering the correct year and following the correct measurement.

States are required to use the "Indicator 14 Data Rubric" for reporting data for this indicator (see Attachment B).

Overview of Issue/Description of System or Process:

The Virgin Islands gathers and reports data to OSEP to fulfill three specific requirements: 1) the annual reporting of required data under Section 618 of the IDEA, 2) the preparation and submission of the State Performance Plan (SPP) and Annual Performance Reports (APRs) under section 616 of the IDEA, and 3) data reporting requirements that are part of the special conditions contained in their current grant award from OSEP.

VIDH uses both paper processes and an electronic database to collect and report data required for SPP/APR and Section 618 data. Strategies to collect SPP/APR data include a self-assessment completed by service coordinators and EIS personnel and child record information that is sent to the VI Part C Coordinator each month. The VI Infants and Toddlers Program use the ECO Summary Statements Calculator to collect and report Early Childhood Outcomes. The service coordinators and administrative assistants in each district are primarily responsible for collecting and reporting the monthly self-assessment data and the Child Outcome Summary Form (COSF) data. The Part C coordinator cross-checks information from the self-assessments in her quarterly random individual child record reviews and provides cross-checks for completeness and accuracy of the COSF forms.

The VI Infant and Toddler Program also maintain a database to collect and report Section 618 data. Two service coordinators, along with administrative assistants are responsible for collecting and reporting section 618 data. Section 618 data instructions are given to the service coordinators and

administrative assistants to ensure standardization of collection of data. In addition, the service coordinators and administrative assistants were trained by NECTAC staff in October 2008 on each of the 618 data collections that are submitted and received training materials. The Part C coordinator is responsible for tabulating data, according to the specific data definitions and instructions. Additional data validity checks are conducted by the VI Part C administrator checks these data for any tabulation errors. ITP is planning to hold training with the assistance of NECTAC and DAC to further strengthen data collection for both SPP/APR and Section 618 data.

Concerning data reported to OSEP under the special conditions contained in their current grant award, certain data are to be collected on all children entering the program after January 1, 2005. Data items to be collected and reported include the date of each child's referral, the date the child's initial evaluation was completed, the date the initial IFSP meeting was held, the IFSP services listed on the child's IFSP, and the date each service was initiated. Based on the data collected the amount of time between each child's date of referral and each subsequent event is to be calculated in order to examine performance regarding meeting the 45-day timeline and the initiation of IFSP services in a timely fashion. This data is recorded and calculations are made using an Excel based format. The data is to be reported to OSEP on a mutually agreed upon schedule, and the data may also be used in reporting performance related to indicators #1 and #7 in subsequent APRs.

Baseline Data for FFY 2004 (2004-2005):

a. Reports submitted on or before due dates:

Virgin Islands submitted its 618 Dec 1, 2004, child count data (Table #1) February 1, 2005. 100%

Virgin Islands submitted its 618 data for Tables 2, 3, 4, and 5 on November 16, 2005. Not 100%

Virgin Islands submitted its FFY 2003 (2003-2004) APR on May 31, 2005. May 31, 2005 was the mutually agreed upon due date for the submission of this APR by OSEP and VI. 100%

b. Accurate (describe mechanisms for ensuring accuracy):

Regarding the accuracy of 618 data, the Part C Coordinator sets a date after December 1 of each year by which the service coordinators for each district and the Part C Coordinator manually tabulate the federal reporting elements from each child's record. Then an ad hoc data consultant retained by the VI Part C program summarizes the manual counts into the electronic database supplied by OSEP for the purpose of summarizing 618 data. Accuracy of the data is assured because data are summarized directly from each child's record and the data reflect the definitions provided by OSEP. Based on its recent data verification visit (January/February 2005) OSEP concluded that the Virgin Islands' system for collecting and reporting data was a reasonable approach to ensuring the accuracy of the data reported under Section 618.

Regarding the accuracy of data for the SPP and APRs, accuracy is ensured differently depending upon the source of the data. If the data are from 618 tables, accuracy is assured as already described. If the data comes from the Virgin Islands' child record review process, accuracy is ensured because children's records are to be reviewed by a team of reviewers that have been oriented and trained in the use of the child record review tool, including what must be present in the child's record in order to receive a positive response to each item of the child record review tool. Team members are encouraged to confer with each other as needed to assure consistent and appropriate responses to record review items. The record review tool itself was designed to accurately reflect regulatory federal requirements of the Part C program.

Regarding data collected for the special conditions, the Part C Coordinator supervises the service coordinators who record data elements contained in the excel spread sheet forms and reviews the spreadsheets for completeness and accuracy before they are submitted to OSEP.

Discussion of Baseline Data:

- a. During the past year the Virgin Islands has primarily submitted its 618 reports and APR by their respective due dates. The second part of the 618 data this year was submitted past its due date because the VI Part C program was short a service coordinator in one district at the time and overall is very limited in personnel. The Part C Coordinator is responsible for the manual collection and reporting of data and is also responsible for daily operational, administrative (including personnel actions) and fiscal matters of the program, in addition to other local reporting requirements. These additional responsibilities of the VI Part C Coordinator as well as the data manager responsibilities have led us to determine the need to acquire personnel separately responsible for data management, collection and reporting. The VI Infants and Toddlers Program intends to acquire an additional position for a data manager who will work in both districts by December 2006.

FFY	Measurable and Rigorous Target
2005 (2005-2006)	100%
2006 (2006-2007)	100%
2007 (2007-2008)	100%
2008 (2008-2009)	100%
2009 (2009-2010)	100%
2010 (2010-2011)	100%

Improvement Activities/Timelines/Resources:

2005-2006

- Identify, orient and train a team of external record reviewers to carry out the child record review process. Resources: VI ITP. January – June 2006
- Include newly identified external reviewers in child record reviews in April, May of 2006 as part of the training for external reviewers. Resources: VI ITP, NECTAC.
- Gather and submit DEC 1 child count by Feb 1, 2006. Resources: VI ITP

2006-2007

- Include emphasis on accuracy in training activities for data collection staff. Resources: VI ITP, NECTAC. March-May 2007
- Develop procedures to ensure timely submission of other 618 tables by due date. Resources: VI ITP. Nov 1, 2006
- Prepare and submit APR by February 2007 by identifying data collection, schedule, and implementing a method for tracking progress on indicators throughout reporting year. Resources: VI ITP. February, 2007
- Develop procedures to ensure timely submission of DEC 1 child count by Feb 1, 2007. Resources: VI ITP January 2007.
- Request information from states that collect data manually to determine techniques and methods the Virgin Islands could implement to improve the likelihood accuracy and timeliness. Resources: VI ITP office personnel February 2007
- Meet with service coordinators to ensure data collection procedures are being followed. Resources: VI ITP Part C Coordinator. Ongoing
- Recruit and employ a person for data management. Resources: Part C Coordinator, VI ITP office personnel June 2007

2007-2008

- Gather and submit 618 data by respective due dates. Resources: VI ITP Ongoing
- Review and revise targets and indicators as needed. Resources: VI ITP January 2008
- Meet with service coordinators to ensure data collection procedures are being followed. Resources: VI ITP Part C Coordinator. Ongoing

2008-2009

- Review and refine written procedures and guidelines for data collection. Resources: VI ITP. August 2008
- Review and revise targets and indicators as needed. Resources: VI ITP January 2009

2009-2010

- Review and revise targets and indicators as needed. Resources: VI ITP January 2010

2010-2011

- Review and revise targets and indicators as needed, Resources: VI ITP January 2011

2010-2011

- Utilize DAC and NECTAC training . . .

Attachment 1

CHILD OUTCOMES SUMMARY FORM

Date: / /
 Mon Day Yr

Child Information

Name: _____

Date of birth: / /
 Mon Day Yr

ID: _____

Persons involved in deciding the summary ratings:

Name	Role

Family information on child functioning (Check all that apply):

- ☐ Received in team meeting
- ☐ Collected separately
- ☐ Incorporated into assessment(s)
- ☐ Not included



Education Programs, U.S. Department of Education.” Please contact staff@the-ECO-center.org if you wish to use or adapt the form.

1. POSITIVE SOCIAL-EMOTIONAL SKILLS (INCLUDING SOCIAL RELATIONSHIPS)

To answer the questions below, think about the child's functioning in these and closely related areas (as indicated by assessments and based on observations from individuals in close contact with the child):

- *Relating with adults*
- *Relating with other children*
- *Following rules related to groups or interacting with others (if older than 18 months)*

1a. To what extent does this child show age-appropriate functioning, across a variety of settings and situations, on this outcome? *(Circle one number)*

Not Yet		Emerging		Somewhat		Completely
1	2	3	4	5	6	7

Supporting evidence for answer to Question 1a

Source of information	Date	Summary of Relevant Results

1b. (If Question 1a has been answered previously): Has the child shown any new skills or behaviors related to positive social-emotional skills (including positive social relationships) since the last outcomes summary? *(Circle one number)*

Yes	1 → Describe progress:
No	2

2. ACQUIRING AND USING KNOWLEDGE AND SKILLS

To answer the questions below, think about the child's functioning in these and closely related areas (as indicated by assessments and based on observations from individuals in close contact with the child):

- *Thinking, reasoning, remembering, and problem solving*
- *Understanding symbols*
- *Understanding the physical and social worlds*

2a. To what extent does this child show age-appropriate functioning, across a variety of settings and situations, on this outcome? *(Circle one number)*

Not Yet		Emerging		Somewhat		Completely
1	2	3	4	5	6	7

Supporting evidence for answer to Question 2a

Source of information	Date	Summary of Relevant Results

2b. (If Question 2a has been answered previously): Has the child shown any new skills or behaviors related to acquiring and using knowledge and skills since the last outcomes summary? *(Circle one number)*

Yes	1 →	Describe progress:
No	2	

3. TAKING APPROPRIATE ACTION TO MEET NEEDS

To answer the questions below, think about the child's functioning in these and closely related areas (as indicated by assessments and based on observations from individuals in close contact with the child):

- Taking care of basic needs (e.g., showing hunger, dressing, feeding, toileting, etc.)
- Contributing to own health and safety (e.g., follows rules, assists with hand washing, avoids inedible objects) (if older than 24 months)
- Getting from place to place (mobility) and using tools (e.g., forks, strings attached to objects)

3a. To what extent does this child show age-appropriate functioning, across a variety of settings and situations, on this outcome? (Circle one number)

Not Yet		Emerging		Somewhat		Completely
1	2	3	4	5	6	7

Supporting evidence for answer to Question 3a

Source of information	Date	Summary of Relevant Results

3b. *(If Question 3a has been answered previously):* **Has the child shown *any* new skills or behaviors related to taking appropriate action to meet needs since the last outcomes summary?** *(Circle one number)*

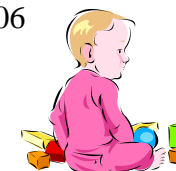
Yes	1 →	Describe progress:
No	2	

ATTACHMENT 2

Part C of IDEA - Early Intervention Programs

U. S. Virgin Islands Infants and Toddlers Program -2006

Your feelings about early intervention



1. To what level has early intervention helped your family know and understand your rights?

1	2	3	4	5	6	7		8	
Early intervention has not helped us know about our family's rights		Early intervention has done a few things to help us know about our family's rights		Early intervention has done a good job of helping us know about our family's rights		Early intervention has done an excellent job of helping us know about our family's rights		I don't understand this question	

2. To what level has early intervention helped your family be able to talk about your child's need to others?

1	2	3	4	5	6	7		8	
Early intervention has not helped us be able to talk about our child's needs with others		Early intervention has done a few things to help us be able to talk about our child's needs to others		Early intervention has done a good job of helping us to be able to talk about our child's needs to others		Early intervention has done an excellent job of helping us be able to talk about our child's needs to others		I don't understand this question	

3. To what level has early intervention helped your family be able to help your child grow and learn?

1	2	3	4	5	6	7		8	
Early intervention has not helped us help our child grow and learn		Early intervention has done a few things so that we can help our child grow and learn		Early intervention has done a good job of helping us help our child grow and learn		Early intervention has done an excellent job of helping us help our child grow and learn		I don't understand this question	



Thank you for completing this survey!



